



## CLYDESDALE HORSE SOCIETY OF NEW ZEALAND (INC)

Please send to: The Secretary, Gareth Pryce  
4016 Mokau Road, RD48, Urenui 4378

### STALLION SERVICE RETURN

Registration Number of Stallion \_\_\_\_\_

Registered Name of Stallion \_\_\_\_\_

Details of Mares

Registration Number	Registered Name of Mare	Registered Name of Owner	Date last Served*

\* (If running with stallion indicate actual dates; .e.g. 01/08/2017 to 01/12/2017)

I hereby certify that the above mares were served by this stallion on the date(s) shown or had been running with this stallion within the dates shown.

Date \_\_\_\_\_ Stallion Owner Signature \_\_\_\_\_

Stallion Owner Name (Printed) \_\_\_\_\_

This form is to be sent to the Secretary before 30 April.