



SENDERA REGISTRY BREEDERS/SERVICE CERTIFICATE

Sendera Draft Horse Registry
 PO BOX 468
 Tioga, TX 76271
 TEL: (903) 883-SPOT (7768)
 admin@SenderaDraft.com

This form is used to document and certify any type of breeding to a Sendera Draft or Sendera Sporthorse.

This Breeders/Service Certificate is a document that can be given to the mare owner and used to register the resulting foal. This document **must** be submitted to the Registry with an accompanying Registration Application - **FORM RA.1601** or **FORM SH.1805**. Please save this document in a secure location.

Please refer to the current Rulebook for any additional requirements or contact the registry.

I. SERVICE/BREEDERS CERTIFICATE: (ANY ALTERATIONS OR ERASURES MAY VOID THIS BREEDERS CERTIFICATE)
THIS BREEDER'S CERTIFICATE MUST BE FULLY COMPLETED INCLUDING: REGISTRATION NAMES AND NUMBERS OF THE SIRE AND DAM, CORRECT BREEDING DATES AND BREEDING YEAR. INCOMPLETE INFORMATION MAY CAUSE A DELAY PROCESSING THIS APPLICATION.

BREEDING DATES: _____ **BREEDING YEAR:** _____

Artificial Insemination ___ Clone ___ Embryo Transfer ___ Frozen Semen ___ Hand Bred ___ Pasture bred ___ Transported Semen ___

This is to certify that the stallion _____ Registration #: _____

Breed of stallion (if not Sendera): _____

has been bred to the mare _____ Registration #: _____

Breed of mare (if not Sendera): _____

•OWNER(S) OF STALLION AT TIME OF BREEDING: (Please print as it appears on the Stallion's Certificate of Registration)

NAME: _____ **EMAIL:** _____

ADDRESS: _____ **CITY:** _____ **STATE/PROVINCE:** _____

ZIP/POSTAL: _____ **PHONE #:** _____ **SDHR MEMBERSHIP#:** _____

CHECK HERE IF THIS IS A NEW ADDRESS

Signature(s) Required X** _____ **Date:** _____

Unless Stallion Report - **FORM SR.1302 has been turned in and signed off by stallion owner/agent.

•OWNER(S) OF MARE AT TIME OF BREEDING: (Please print as it appears on the Mare's Certificate of Registration)

NAME: _____ **EMAIL:** _____

ADDRESS: _____ **CITY:** _____ **STATE/PROVINCE:** _____

ZIP/POSTAL: _____ **PHONE #:** _____ **SDHR MEMBERSHIP#:** _____

CHECK HERE IF THIS IS A NEW ADDRESS

Signature(s) Required X _____ **Date:** _____

•ATTENDING VETERINARIAN AT TIME OF BREEDING (IF APPLICABLE):

NAME: _____ **EMAIL:** _____

ADDRESS: _____ **CITY:** _____ **STATE/PROVINCE:** _____

ZIP/POSTAL: _____ **PHONE #:** _____

Signature Required X** _____ **Date:** _____

**The signature of the attending Veterinarian can be used in place of the stallion owner/agent signature.

Form current as of 1/2020. Fee changes may apply for applications after this date. All fees are subject to change without notice. All fees are non-refundable.