

FOAL REGISTRATION



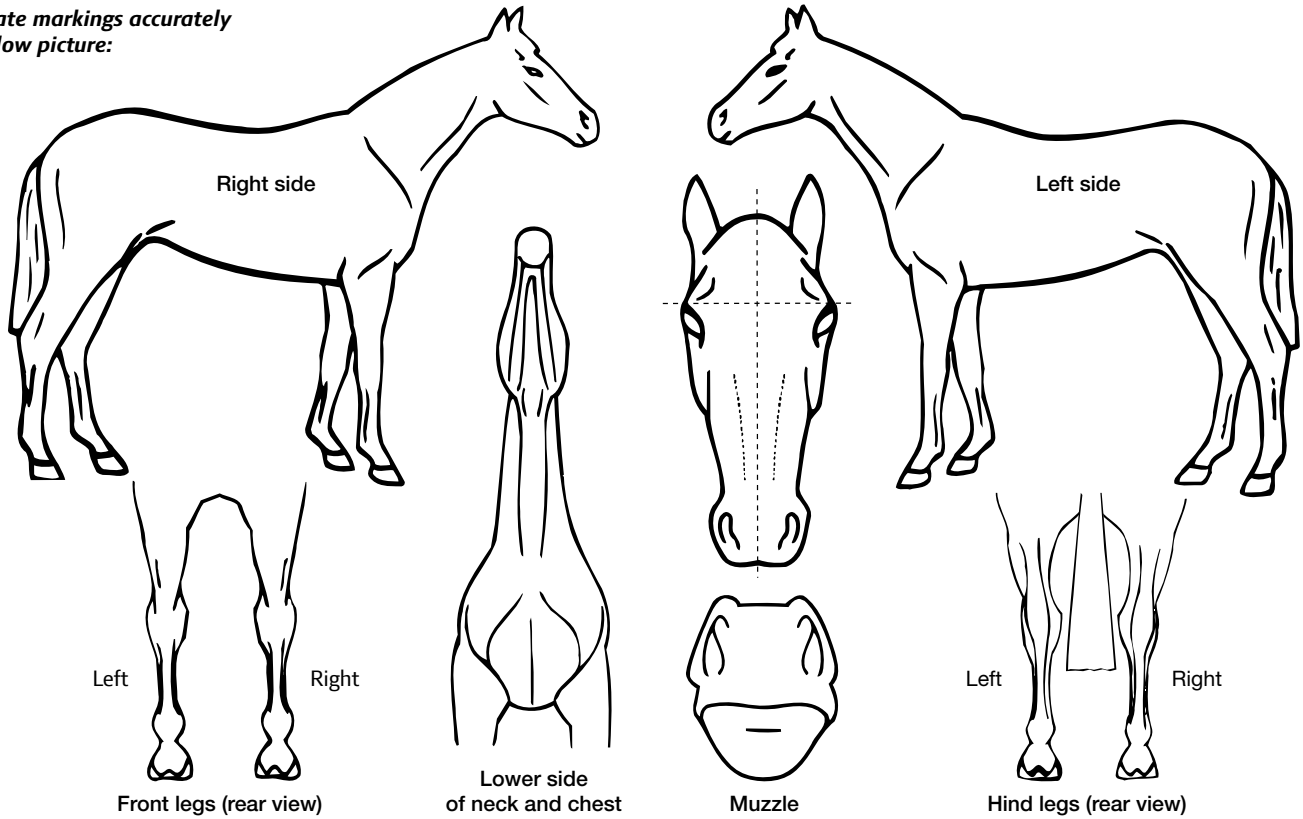
Heste
SEGES Heste
 Agro Food Park 15
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 hestekontoret@seges.dk

The foal registration form must be submitted **40 days after foaling at the latest**.
 Otherwise a late fee is charged. If the dam is not registered at SEGES Heste,
 a copy of her original registration papers must be enclosed.

Enclosed Not enclosed

DAM IDENTITY NO.:		DAM NAME:	
FOAL DATE OF BIRTH:		In special cases where both parents are approved by several breeding societies, please state in which society the foal is to be registered:	
PASSPORT IS NOT TO BE ISSUED: <input type="checkbox"/> (Please state which organisation is to issue the passport):			
MARK: Live foal <input type="checkbox"/> Still born foal <input type="checkbox"/> Deformed foal <input type="checkbox"/> Twin <input type="checkbox"/> Ovum/Embryo transplant <input type="checkbox"/> Foal imported in uterus <input type="checkbox"/>			
FOAL SEX: Colt <input type="checkbox"/> Filly <input type="checkbox"/>			
FOAL NAME: (max 31 characters):			
FOAL COLOUR:		Turning grey <input type="checkbox"/>	May turn grey <input type="checkbox"/> Without markings <input type="checkbox"/>

Indicate markings accurately in below picture:



I, the undersigned, with to register the above according to the rules and rates of Landsudvalget for Heste (the Danish National Committee of Horses).
 By my signature, I accept that the data on the horse stated in this form can be used free of charge by SEGES Heste and relevant breeding societies and that data registered at a later point in time, such as x-rays, can be used in anonymized form. Moreover, I accept that I cannot require any data deleted.

Foal breeder (is also registered as owner unless transfer of ownership is attached)

BREEDER'S PHONE NUMBER:		BREEDER'S E-MAIL ADDRESS:	
BREEDER'S NAME:			DATE OF BIRTH/VAT no.
STREET ADDRESS:			
POSTAL CODE:	CITY/STATE:	COUNTRY:	
DATE:	BREEDERS SIGNATURE:		

If the owner/breeder of the foal is a minor or legally incompetent, the form overleaf must also be completed and signed by the parents/guardian.

OTHER REGISTRATIONS, SEE THE BACK

TURN ➔

Please complete and sign this form if the owner/breeder if the foal is a minor/legally incompetent.

PARENTS'/GUARDIAN'S PHONE NUMBER:		PARENTS'/GUARDIAN'S MAILADDRESS:	
PARENTS'/GUARDIAN'S NAME:			DATE OF BIRTH/VAT no.
STREET ADDRESS:			
POSTAL CODE:	CITY/STATE:	COUNTRY:	
DATE:	PARENTS'/GUARDIAN'S SIGNATURE:		

REGISTRATIONS FOR THE HORSE DATABASE

HOW TO COMPLETE THE FORM:

- Phone number, name, address and signature of reporting person must always be completed.
- The horse identity no. such as registration or stud book number and name.
Note: If the horse is not registered at SEGES Heste, a copy of the original registration papers of the horse must be enclosed.
- Date of event must be completed.
- Mark the event box (see the below description of events). Only one event per line.
- If the event is question is marked with this symbol (*), an additional code must be stated at the same time (see below).

HORSE IDENTITY NO.:	NAME OF HORSE:	EVENT DATE:	REPRODUCTION			TRANS-ACTION	CODES
			* Confirmed pregnant	* Confirmed not pregnant	* Confirmed abortion	* Leaving herd	Additional code A
			10	13	14	16	
			10	13	14	16	
			10	13	14	16	
			10	13	14	16	

REPORTING PERSON'S PHONE NUMBER:		REPORTING PERSON'S E-MAIL ADDRESS:	
REPORTING PERSON'S NAME:			DATE OF BIRTH/VAT no.
STREET ADDRESS:			
POSTAL CODE:	CITY/STATE:	COUNTRY:	
DATE:	REPORTING PERSON'S SIGNATURE:		

TRANSFER OF OWNERSHIP: On transfer of ownership, the original certificate of ownership of the horse must always be enclosed according to the rules and regulations of SEGES Heste. Moreover, on transfer of ownership, written documentation from buyer and seller must be available.

HOW TO REPORT EVENTS:

Events: All fields must be completed. It is possible to report reproduction events for four different mares.
One of the fields Reproduction or Transaction must always be marked, and the code must always be put against the event you wish to register.

Description of reproduction events:

10

Is to be reported if the mare is **confirmed** pregnant
One of the following codes must be stated:
7: Hand examination
8: Scanning
9: Blood samples
10: Other pregnancy examination

14

Is to be reported if it has been **confirmed** that the mare has aborted the foal/embryo.
One of the following codes must be stated:
1: Early feta death
2: Foetus found

13

Is to be reported if the mare is **confirmed not** pregnant.
One of the following codes must be stated:
7: Hand examination
8: Scanning
9: Blood samples
10: Other pregnancy examination

16

Description of transactions events:

Must be completed when an animal leaves the reporting person's horse farm.
One of the following codes must be stated:
11: Exported
2: Slaughtered
3: Dead
4: Destroyed

