



PFERDEZUCHTVERBAND RHEINLAND-PFALZ-SAAR e.V. (RPSI)
POST OFFICE BOX 429 • MURDO, SD 57559 • (605) 669-2200 • FAX (605) 734-8060

BREEDING CERTIFICATE / INSEMINATION CERTIFICATE STUD _____

Breeder (Mare's owner at time of breeding) _____

Mare _____
(Registration No.) (Name, Breed) (Year of Birth)

Color and Marking _____

Father of mare _____
(Name and Registration No.)

Mother of mare _____
(Name and Registration No.)

<p>has been <input type="checkbox"/> bred <input type="checkbox"/> inseminated with fresh semen <input type="checkbox"/> inseminated with frozen semen (please mark with an x where applicable)</p> <p>on: _____</p> <p>Stallion _____</p> <p>RN _____</p> <p>last on <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table></p>									<p>In addition by the stallion mentioned below <input type="checkbox"/> bred <input type="checkbox"/> inseminated with fresh semen <input type="checkbox"/> inseminated with frozen semen</p> <p>Name _____</p> <p>RN _____</p> <p>on _____</p>

Place _____ Date _____ Signature: Stallion owner/Stud supervisor _____

BREEDING RESULT / FOAL NOTIFICATION

(Breeding certificates from breedings by other stallions must be enclosed)

Foal born on: _____ **Sex:** _____ **Name:** _____

Color and Markings: _____

The mare – remained not in foal / aborted on / the foal was born dead/died on: _____
circle appropriate response