



Live Foal/No Foal Report

For foaling year: _____

Check Appropriate Box

Name of Mare	Tattoo/Freeze Brand Number	Live Foal	Barren	Aborted	Dead Foal	Foal Died
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						

Signature of owner/lessee of mare at time of foaling or authorized agent

Date

Printed Name

Membership No.

There is no fee to record this information.

E-mail to memberservices@ustrotting.com.



U.S. Trotting Association
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