



New Zealand
**Iberian Horse
Association Inc**

SERVICE CERTIFICATE

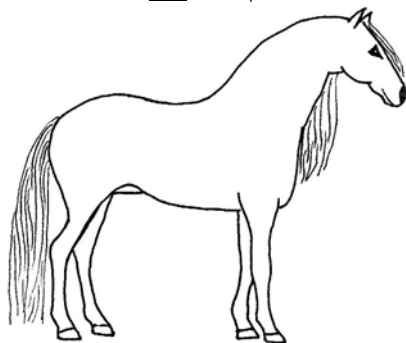
No:
Year:

STUD NAME:*	
STALLION OWNER/AGENT:*	
STALLION:*	REG NO:*

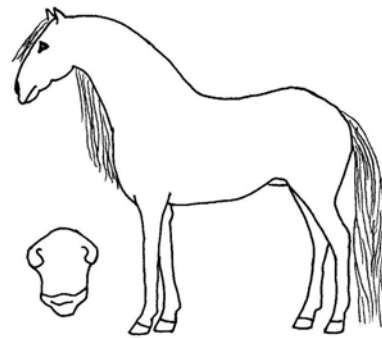
MARE NAME:*		REG NO:*(if any)
BREED:	COLOUR:*	YOB:
SIRE:	DAM:	
OWNER:*		
ADDRESS:*		
PHONE:		

LAST SERVICE DATE:*
POSITIVE PREGNANCY TEST DATE:*
FOAL DUE DATE (gestation 340 days): *

Fields marked with * must be completed. Others are recommended to facilitate a more detailed foal registration & to assist mare owner



RIGHT OFF SIDE



LEFT NEAR SIDE

Whorls to be shown as: **X** Scars to be shown as: →
Brands & white markings to be clearly defined.



FORE LEGS
REAR VIEW

HIND LEGS
REAR VIEW

I certify to the correctness of the description shown on this certificate taken for the purpose of the studbook requirements of this Association	
(Signature of stallion owner or agent)	(Date)

Send one copy to **NZIHA Registrar with Stallion Service Return at end of breeding season.** Jane Holm, Stud Book Keeper, NZ Iberian Horse Association Inc
85 Heald Rd, Hunua, RD3 Papakura, Auckland 2583
One copy **for mare owner to attach to Application for Foal Registration.**
One copy... for stallion owner's records.