



Canadian Shire Horse Association
 Maxine Campbell - Secretary
 Box 387
 Dawson Creek, B. C.
 V1G 4H3
 cshasec@pris.ca

Stallion Service Report

Breeding Season Year: _____

Foaling Year: _____

Name of Stallion: _____

CSHA#: _____

SHS#: _____

ASHA#: _____

Owner Name & Address: _____

List all Services including All Breed and Grade Mares.

Indicate Type of Service: Hand Bred -- Pasture Bred-- AI

Chilled Semen -- Frozen Semen -- Embryo Transfer

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Name of Mare: _____

Registration Number: _____

Name of Owner: _____

Date of First Service: _____

Date of Last Service: _____

Type of Service: _____

=====

Name of Mare: _____

Registration Number: _____

Name of Owner: _____

Date of First Service: _____

Date of Last Service: _____

Type of Service: _____

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Name of Mare: _____

Registration Number: _____

Name of Owner: _____

Date of First Service: _____

Date of Last Service: _____

Type of Service: _____

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Signature of Stallion Owner: _____