AMERICAN MINIATURE HORSE ASSOCIATION

MUST BE POST MARKED ON OR BEFORE JANUARY 15TH

5601 S Interstate 35W Alvarado TX 76009 (817) 783-5600

SUBMIT A SEPARATE FORM ON EACH STALLION USED

STALLION BREEDING REPORT

Stallion's Full Registered Name:	AMHA Registration Number:

	Registered Name of Mare Bred	AMHA REG NO	Method of Breeding A H P T E	Dates mare was exposed (if pasture bred, so state and give dates in and out of pasture). *See instructions	Year of Breeding
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					

CERTIFICATION: I do certify that the above named mares were exposed to this stallion on the days shown above.

_____ **Date:** _____

WRITTEN signature of RECORDED owner or RECORDED LESSEE, of Stallion at time of Service. **ALL SIGNATURES REQUIRED IF JOINT OWNERSHIP.**

NAME:_____ EMAIL:_____

ADDRESS _____ **Phone:** _____

COMPLETE FORM & RETURN TO AMHA WITH FILING FEE - See Work Order for current fee