



BREEDER'S CERTIFICATE & STALLION SERVICE REPORT AUTHORIZATION

Please specify:

Breeding season of _____ year through breeding season of _____ year

Stallion Name: _____ Registration #: _____

Recorded Owner(s)

Name(s) of person(s) authorized by the recorded owner(s) to sign Breeder's Certificates and Stallion Service Reports for the above named stallion:

Please specify if all signatures are required or if only one signature is needed by circling either "and" or "or".

1. _____ (and / or)

2. _____ (and / or)

3. _____ (and / or)

4. _____ (and / or)

Signature(s) of recorded owner(s) or authorized agent(s) are required on the lines below:

_____ Date _____

_____ Date _____

_____ Date _____

_____ Date _____

Please return completed to:
American Saddlebred Registry, Inc.
4083 Iron Works Parkway
Lexington, KY 40511
or fax to: (859) 259-1628.