



NORWEGIAN FJORD HORSE REGISTRY

Office of the Registrar

1801 W. County Rd 4, Berthoud, CO 80513

(303) 684-6466

(888) 646-5613 – Toll Free Fax

E-mail: registrar@nfhr.com

CERTIFICATE OF STALLION SERVICE

I hereby certify that a Fjord **MARE** named:

_____ NFHR Reg. #: _____

Owned by: _____

Street Address: _____

City, State, Zip: _____

was bred to my Fjord **STALLION** named:

_____ NFHR Reg. #: _____

NFHR Semen Transport I.D. #: _____ (if service was by artificial insemination).

by:

NATURAL SERVICE on the following date(s):

(if pasture bred, give the dates the mare was turned into the pasture and taken out of the pasture)

ARTIFICIAL INSEMINATION on the following date(s):

(as indicated by the person inseminating the mare on the NFHR Receipt for Transported Semen)

Signature of Owner of Stallion at Time of Service

Date

Name (printed): _____

Street Address: _____

City, State, Zip: _____

Telephone: (_____) _____ - _____

THIS REPORT IS TO BE COMPLETED BY THE STALLION OWNER AND GIVEN TO THE MARE OWNER FOLLOWING STALLION SERVICE.

Note: *This form must accompany the application for registration of foal unless the sire, dam and foal to be registered are owned by the same person.*