

MASS THOROUGHBRED BREEDERS' ASSOCIATION

Stallion/Mare Cover Report

STALLION INFORMATION:

Name of stallion:

Name of Farm where stallion stood for the 2024 breeding season:

LIST OF MARES BRED BY THE ABOVE LISTED STALLION:

1. Mares: ID (JC# Microchip, tattoo): _____ Date Bred: _____

Mares Name: _____

Breeders Name(s): _____ (must be member and on file with the MTBA)

One form for each mare bred back must be submitted

TO BE FILLED OUT BY STALLION FARM MANAGER:

I, (we), the undersigned do declare that the Thoroughbred Stallion (name) _____ did stand the entire breeding season, February 1st through June 30th, inclusive in the Commonwealth of Massachusetts at (name of farm) _____.

And I declare that the Stallion did cover said mare according the Jockey Club definitions;

Farm Managers signature: _____

Farm Managers printed name: _____

Send To: MTBA@comcast.net or MTBA, 121 Pine Street, Rehoboth, MA 02769

MTBA Use:

Date Received: ____/____/____ Date Approved ____/____/____

By: _____