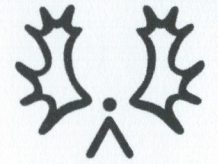


# Trakehner Breeders' Fraternity Stallion Covering Return



Year.

Please photocopy as required

**Stallion**

**Registration No.**

**Standing At:**

Owner's Name & Address <i>(please print clearly)</i>	Name of Mare	Breed of Mare	First Covering Date	Last Covering Date	Tick as Appropriate				
					In Foal	Barren	Slipped	Twins	A.I
Tel No									
Tel No									
Tel No									
Tel No									
Tel No									

**COVERING RETURNS MUST BE RETURNED TO THE REGISTRAR BY 31ST OCTOBER IN THE YEAR OF THE STUD SEASON COVERED**