



MINIATURE HORSE FEDERATION INC.

Return both sides to: Miniature Horse Federation Inc.

PO Box 146

GULGONG NSW 2852

Email: secretary@miniaturehorsefederation.com

or registrar@miniaturehorsefederation.com

MARE VETERINARY SOUNDNESS INSPECTION CERTIFICATE

This form must be entirely filled out by a qualified Veterinarian

IMPORTANT: Measurements taken from highest point of wither and recorded in inches

Don't forget horses applying for Gold Star in the Vet Soundness section must fill out a V S C list of horses for Gold Star form

I (Print name) _____ do hereby declare on this day _____

of _____ 20_____, that the required examination, set out below and on both sides of this form, has been carried out by me on the following horse.

Name of Stallion: _____

Colour: _____ Height : _____ Inches
Height to be taken at highest point of wither

Registration no. (as stated on identifying registration papers): _____ Date of birth (as stated on identifying registration papers): _____

Visible Brands on horse: Near Side: _____ Off Side: _____ over _____

Microchip number (as scanned by Veterinarian): _____

Approximate age of horse from examination of teeth _____

| Any Visible signs of the following: | Yes | or | No |
|-------------------------------------|--------------------------|-------|--------------------------|
| Dwarfism..... | <input type="checkbox"/> | | <input type="checkbox"/> |
| Uneven bite (3mm max allowed)..... | <input type="checkbox"/> | | <input type="checkbox"/> |
| Locking stifle..... | <input type="checkbox"/> | | <input type="checkbox"/> |
| Malformation of the genitals..... | <input type="checkbox"/> | | <input type="checkbox"/> |
| Congenital Cataract..... | <input type="checkbox"/> | | <input type="checkbox"/> |

If any other discernable genetic fault present please state: _____

Temperament and Agility Scoring – Scoring to be assessed out of 10

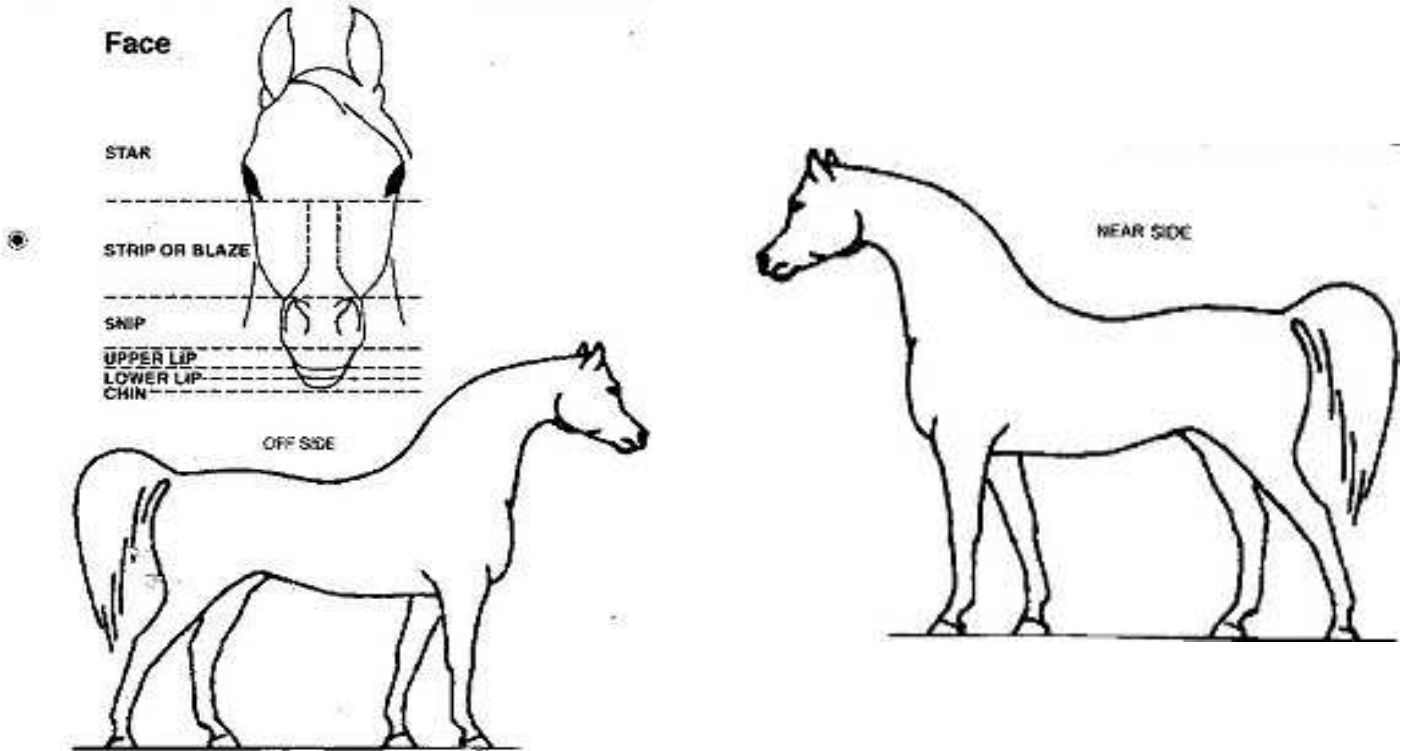
- From a stationary position stepping to the nearside (left) _____
- From a stationary position stepping to the offside (right) _____
- From a stationary position walk forward in a straight line _____
- Trot in a straight line _____
- From a stationary position back up _____
- Eye/h hoof Co-ordination test, step over obstacle _____
- Temperament assessment _____

ANY COMMENTS _____

Rear side of: **MARE VETERINARY CERTIFICATE OF SOUNDNESS**

Please shade all white pattern markings in red, for example pinto, appaloosa, socks, stockings, blazes, stars etc. Mark scars in blue or black.

Show brands and their precise location on horse in blue or black.



The following are not reasons for excluding the horse from registration. Please indicate any are present:

Deafness Yes No Any external organ injury Yes No
 Any evidence of surgery Yes No Any evidence of lameness Yes No

Any extra comments: _____

I HEREBY CERTIFY THAT BOTH SIDES OF THIS MARE VETERINARY CERTIFICATE HAS BEEN COMPLETED BY THE UNDERSIGNED

NAME OF VETERINARY PRACTICE _____

CONTACT DETAILS (phone) _____ QUALIFICATIONS: _____

SIGNATURE OF ATTENDING VETERINARIAN: _____ DATE: _____

Check list for owner when Vet comes

- Official measuring stick. Remember measure at the highest point of wither in hands and inches
- Access to level measuring surface.
- Red pen and Black pen.
- Applicable registration papers from either the Federation or other association accepted by the Federation
- The front and back of this form.
- If horse is micro-chipped, make sure Vet brings compatible scanner or one is on hand.

IMPORTANT: This form is for mares that were born on or after 1st August 2008 at time of upgrade and before being bred with.