



New Zealand Shetland Pony Breeders Society (Inc.)

Secretary: Lesley Lewis, 530 Marshland Road, Christchurch 8083, New Zealand
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EMBRYO TRANSFER PERMIT APPLICATION FORM

Refer to NZSPBS website or contact the Secretary for the current Schedule of Fees
Refer to the NZSPBS Constitution & Regulations for further information

For the Breeding Season:	_____ / _____
Name of Stallion:	
Registered No:	
Name of Donor Mare:	
Registered No:	
Name of Recipient Mare:	
Printed Name of Owner/Lessee of Donor Mare:	
Signature of Owner/Lessee of Donor Mare	
Address of Owner/Lessee of Donor Mare:	
Telephone No of Owner/Lessee of Donor Mare:	

- The recorded Owner/Lessee of the above named Donor Mare agrees to abide by the NZSPBS Regulations governing Embryo Transfer.
- Issuance of this Permit verifies that DNA for the Stallion and Donor Mare is on record with the Society.

<p>Permit Number _____ is issued for the _____ / _____ Breeding Season</p> <p>_____</p> <p>Date & Signature of NZSPBS Registrar</p>
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