





BOOKING APPLICATION "THIS IS NOT A CONTRACT, ALL APPLICANTS ARE SUBJECT TO APPROVAL"

MARE NAME:	Share #/Payable:	
FREEZEBRAND/MICROCHI	P#/REGISTRATION	
SIRE/DAM:		
YEAR FOALED	RECORD/EARNINGS	
CURRENT MARES STATUS:	IN FOAL / BARREN/ MAIDEN 2025 BR	ED TO:
LAST BRED DATE:	COMMENTS:	ET MARE: Y or N
WE REQUIRE ENTIRE OWNER	SHIP BILLING % BREAKDOWN AND ALL CONT	TACT INFORMATION FOR EACH OWNER
OWNERS/OWNERS:		
NAME:	EMAIL:	
ADDRESS:		
PHONE/FAX:	% owned:	
NAME:	EMAIL:	
ADDRESS:		
PHONE/FAX:	% owned:	
NAME:	EMAIL:	
ADDRESS:		
PHONE/FAX:	% owned:	
NAME:	EMAIL:	
ADDRESS:		
PHONE/FAX:	% owned:	
	BOARD AT SOUTHWIND FARMS OF N	
	E LOCATION AT TIME OF BREEDING	
	Phone:	
	fax:fax:	

PLEASE RETURN ALL COMPLETED APPLICATIONS TO

walner@preferredequine.com or (914) 773-1633 (fax)