

## Examination Form Foal

Global Dressage Auction 2021

I, Mazeta Aeb declare to have examined the foal written below and to have filled in this form truthfully. This examination has been commissioned by the owner of the foal.

### Basic foal information

Foal name	Romance D
Sex	Hengst
Date of birth	2-mei-21
Color	Donkerbruin
Sire	For Romance
Dam	Kamante D
Dam pedigree	Negro x Jazz x Amor
Chipnummer (Foal/Mare)	<u>52821000 42 66570</u>

### Examination

1. General appearance	<input checked="" type="checkbox"/> Normal	<input type="checkbox"/> Abnormal
2. Skin	<input checked="" type="checkbox"/> Normal	<input type="checkbox"/> Abnormal
Remarks	<hr/>	
3. Abnormalities eyes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
4. Abnormalities teeth	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
5. Abnormalities nose	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
Remarks	<hr/>	
6. Breathing	<input checked="" type="checkbox"/> Normal	<input type="checkbox"/> Abnormal
Spontaneous coughing	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
Nasal discharge	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
Remarks	<hr/>	
7. Digestion	<input checked="" type="checkbox"/> Normal	<input type="checkbox"/> Abnormal
Remarks	<hr/>	

**8. Circulatory system**

Heart rate at rest  Normal  Abnormal

Heart rate after exercise  Normal  Abnormal

Remarks \_\_\_\_\_

**9. Locomotive system**

Abnormalities on hooves and legs  No  Yes

Abnormalities in walk and trot  No  Yes

Remarks \_\_\_\_\_

**10. Indication for vices**

No  Yes

**11. Genitals**

Abnormalities external genitals  No  Yes

Two testicals  No  Yes

Testicles descended  No  Yes

Remarks \_\_\_\_\_

**12. Are there any other symptoms, abnormalities or defects?**

If yes, which one(s)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Final conclusion**

During the examination of the above mentioned foal I did not find abnormalities which are functional relevant to the purpose of its use.

Date: 07 June 2021

Place Rosmalen

Name owner/commissioner J. Dielissen Rosmalen

Signature \_\_\_\_\_

Name veterinarian

Dr. Maarten Aarts - Dierenartspraktijk De Meierij

Signature and stamp \_\_\_\_\_

Dierenarts M.G.A. Aarts  
D.A.P. De Meierij  
Tel: 0413-472650