



Application for Retrospective Covering Certificate

Stallion Name:	UELN: _____ Equine Premises No _____
-----------------------	---

Name of Mare:		Owners Name:
Microchip No.		Address:
Covering Date	/ /20 to / /20	

Name of Mare:		Owners Name:
Microchip No.		Address:
Covering Date	/ /20 to / /20	

Name of Mare:		Owners Name:
Microchip No.		Address:
Covering Date	/ /20 to / /20	

Name of Mare:		Owners Name:
Microchip No.		Address:
Covering Date	/ /20 to / /20	

I confirm that I have identified the named mares and have been mated to the named stallion.

Name of Owner/Agent: _____ **Signed:** _____

Name of Stud: _____

Address: _____

Telephone: _____ **Email:** _____

Retrospective Covering Certificate €50 per item Stallion owner must be a current paid member of the IHRA. Send completed applications to Irish Harness Racing Association, Unit 18 Brewery Business Park, Dundalk, Co Louth