



2009 CTHS ALBERTA DIVISION FOAL REPORT FORM

Foal Reports will be posted to the CTHS web site at www.cthsalta.com

Please complete the following information for each foal born in the 2009 year:

| | | | |
|---------------|-------|---------------|-------|
| Date of Birth | _____ | Date of Birth | _____ |
| Color/Gender: | _____ | Color/Gender: | _____ |
| Sire: | _____ | Sire: | _____ |
| Dam: | _____ | Dam: | _____ |
| Owner: | _____ | Owner: | _____ |
| City/Town: | _____ | City/Town: | _____ |

| | | | |
|---------------|-------|---------------|-------|
| Date of Birth | _____ | Date of Birth | _____ |
| Color/Gender: | _____ | Color/Gender: | _____ |
| Sire: | _____ | Sire: | _____ |
| Dam: | _____ | Dam: | _____ |
| Owner: | _____ | Owner: | _____ |
| City/Town: | _____ | City/Town: | _____ |

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| Dam: | _____ | Dam: | _____ |
| Owner: | _____ | Owner: | _____ |
| City/Town: | _____ | City/Town: | _____ |

Please fax, email or mail your foal reports to the CTHS Alberta Division office at:



cthsalta@telusplanet.net

Fax: 403-244-6909

Airways Business Plaza

#218 - 1935 - 32 Ave. N.E.

Calgary, Alberta T2E-7C8