



# WEATHERBYS

## AGE AND MARKINGS CERTIFICATE INSTRUCTIONS (Aide-Memoire)

Because many markings need to be returned we have produced the following to help in the completion of the form overleaf.

### DO

- ✓ **SCAN THE HORSE FOR A MICROCHIP AND RECORD THE NUMBER IN THE BOX OVERLEAF.**
- ✓ **DESCRIBE** in the narrative all features drawn on the sketch and **DRAW** all features that you have described.
- ✓ Ensure that all features are **DRAWN FROM ALL PERSPECTIVES** on all of the diagrams.
- ✓ Ensure that the position of all features are **SUFFICIENTLY DESCRIBED** (i.e. head whorls and markings in relation to the mid-line and eye level etc).
- ✓ **DESCRIBE CREST WHORLS ON BOTH SIDES OF THE NECK** (if one or both are not present please state. e.g. "There are no crest whorls on the left side" since the rarity of this event qualifies as an identifying feature).
- ✓ Ensure that you record **ALL DISTINGUISHING FEATURES**. Hatch white markings in RED, mark whorls with an "X", feathering with "—" and prophets thumb marks with a "▷" and scars with "→". Include any permanent identifying congenital defects such as parrot mouth etc.
- ✓ Indicate the location of the microchip with (M)→
- ✓ Make sure the description is clearly legible and completed in dark ink. Preferably avoid writing in lower case handwriting - if possible type the description, or print in block capitals.

### DON'T

- ✗ **DON'T ABBREVIATE OR USE DITTO MARKS (")** - use "right hand side" not R.H.S.
- ✗ **DON'T USE TECHNICAL TERMS NOT EASILY UNDERSTOOD BY A LAYPERSON** (e.g "caudal").
- ✗ **DON'T USE TERMS SUCH AS STOCKING OR SOCK** - describe the white in relation to the fetlock, pastern, cannon bone or hock etc.
- ✗ **DON'T FORGET TO SIGN AND DATE THE MARKINGS FORM AND GIVE YOUR PRACTICE ADDRESS.**

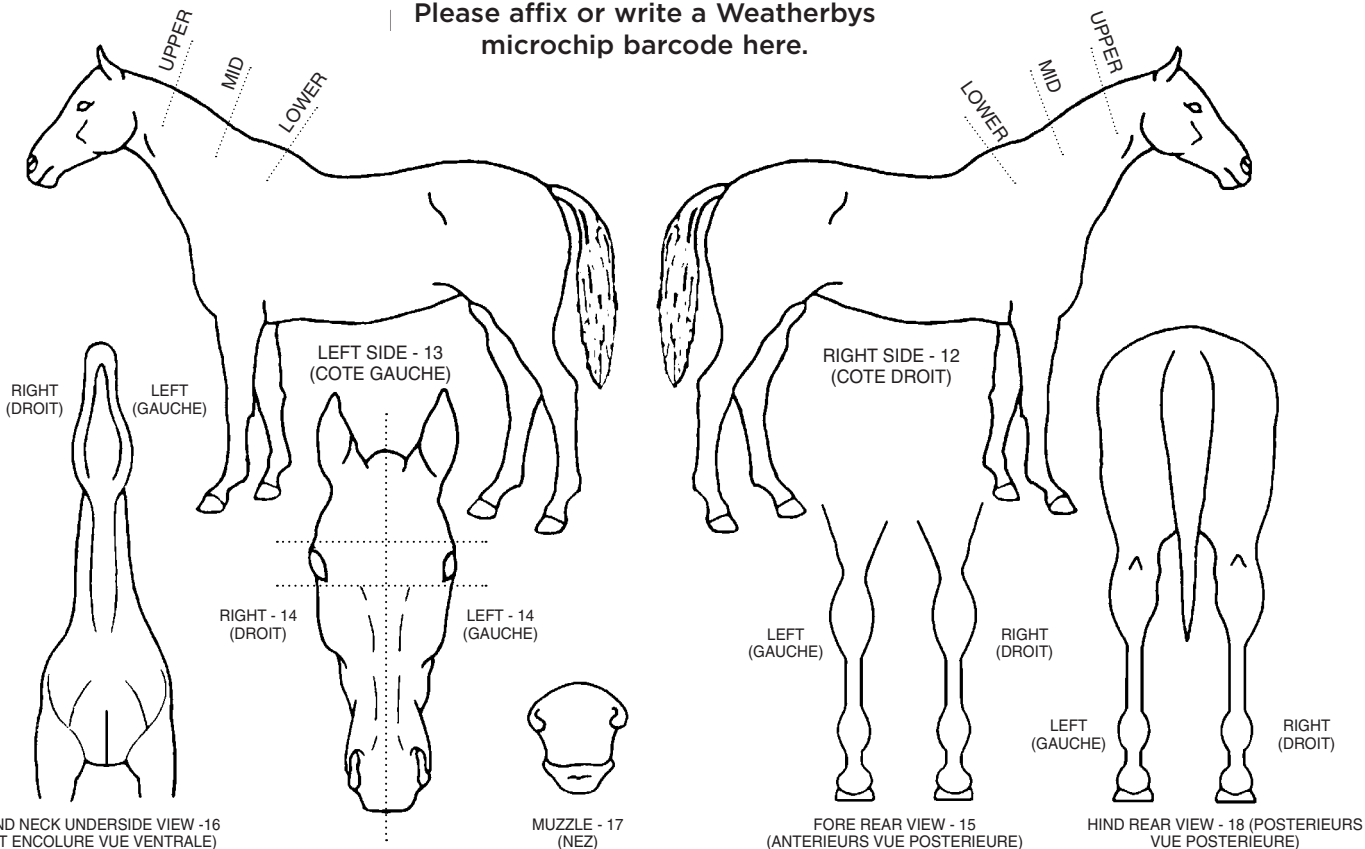
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Please affix or write a Weatherbys microchip barcode here.



NAME AND ADDRESS OF VETERINARY SURGEON (IN BLOCK CAPITALS)	Date of examination / /
Signature of Veterinary Surgeon <small>(not to be the breeder, owner or trainer of the horse)</small>	

### VETERINARY CERTIFICATE OF AGE AND MARKINGS FOR IDENTIFICATION PURPOSES

Please read instructions overleaf before completing this form.

NAME OF OWNER		TEL	
ADDRESS			

\*THESE ITEMS ARE BASED ON INFORMATION SUPPLIED BY THE OWNER OR THEIR AGENT. PLEASE WRITE CLEARLY.

	COLOUR (Robe)	SEX (Sexe)	* DATE OF BIRTH (D.d.N)	* SIRE (Pere)	* DAM (Mere)
HEAD - (3b) (TETE)					
LIMBS (Membres)	L.F. (A.G.) (3c)				
	R.F. (A.D.) (3d)				
	L.H. (P.G.) (3e)				
	R.H. (P.D.) (3f)				
BODY /NECK- (3g) (CORPS)					
MARKINGS (3h) (MARQUES)					

DO NOT WRITE BELOW THIS LINE