

CYMDEITHAS Y MERLOD A'R COBIAU CYMREIG WELSH PONY AND COB SOCIETY

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All fields marked with * must be completed. Incorrectly filled in forms or those with errors will be returned.

When submitting forms to the WPCS you will need to provide us with certain personal information. Full details of our privacy policy can be found on our website. If you would prefer a hard copy, please ask a member of WPCS staff.

CERTIFICATE OF CASTRATION

Section 1 – Animal Details (fields marked * must all be completed)

*Name of Animal:

*Section: A B C D WPBR

*Colour Date of Birth: / /

Section 2 – Owner Details (fields marked * must all be completed)

*Name: Mr / Mrs / Miss / Other Membership No:

*Address:

*Postcode: *Daytime Tel:

*E-mail Address:

Section 3 – (Certification of castration by veterinary surgeon) MUST be completed by a qualified Veterinary Surgeon

*Please delete as appropriate:

I hereby certify that I have removed both testicles, associated structures and a length of the adjoining spermatic cord from the above-named pony.

I have examined the animal named above and found no external presence of testicles. I have found scar(s) on the scrotum. This suggests that the animal has already been castrated.

I can confirm the animal I have examined is the one named above, and I have scanned the microchip, and this corresponds with the passport/registration document and is recorded below:

*Microchip Number:

*Date: / /

*Veterinary Official Stamp

*Signature of Veterinary Surgeon:

*Qualifications: