



Barretts Equine Limited

VETERINARY WITHDRAWAL

Sale _____ Withdrawal Date _____

Horse's Name _____ Hip# _____

Owner _____

Consignor/Trainer _____

Location at time of withdrawal _____

This horse has developed the following condition preventing its presentation at this sale or preventing it from being offered pursuant to Conditions of Sale:

What date did you begin treatment for this condition? _____

Is condition still being treated? Yes _____ No _____

Horse's current routine (Please check) Stall Rest _____ In Light Training _____

At Farm _____ Actively training to race _____

Veterinarian's Name _____

Signature _____ Telephone _____

Address _____

This section must be completed:

Subscribed and sworn to me before this _____ day of _____, 20 _____

Signed _____
(Notary Public)

County _____ My commission expires _____