



GELDING/SPAY REPORT

Instructions:

1. Print in ink only (please write legibly).
2. Return original Certificate of Registration with Gelding/Spay Report and appropriate fees.
3. Retain a copy of this completed form and a copy of your pony's registration papers for future reference.

Gelding/Spay Report Fee: \$10

Make checks payable to: *International Chincoteague Pony Association & Registry LLC*

Please check one:

- Previously registered with ICPAR as a stallion
 Previously registered with ICPAR as an un-spayed mare

On _____, the pony named _____
(date) (Pony's Registered Name)

ICPAR registration # _____ was (circle one) gelded spayed

As the person performing the surgery, I certify that both (circle one) testicles ovaries were removed.

Surgeon's Name

Surgeon's Signature

Owner's Name

Owner's Signature

By signing this document, I hereby certify that the above information is true and correct to the best of my knowledge.

Mail completed form with original certificate of registration and payment to the following address:

International Chincoteague Pony Association & Registry LLC

10723 County Road 11 NE

Elgin, MN 55932

(507) 923-8933

chincoteagueponyassociation@gmail.com

www.chincoteagueponyassociation.com