

**SUPPLEMENTAL NOTIFICATION OF FROZEN INSEMINATION
BREEDING TO THE NATIONAL GREYHOUND ASSOCIATION
P.O. BOX 543, ABILENE, KS. 67410-0543**



**TO BE COMPLETED BY NGA-LICENSED INSEMINATOR
AND SUBMITTED WITH NOTIFICATION OF BREEDING**

I CERTIFY that on _____ I received frozen or chilled semen on
(Date)

_____ **from** _____
(Name of Stud) (Name of Storage Center or Satellite Facility)

I FURTHER CERTIFY that I inseminated the female _____

on the following date(s) _____ **with semen from straws or vials labelled:**

_____, _____, _____,
_____, _____, _____,
_____, _____, _____.

These straws or vials of semen were sealed when presented to me and none of the semen was used to inseminate any other female.

(Printed Name)

(Signature)

(State Vet. License No. or NGA Membership No.)

(Address)

(City, State, Zip Code)

Complete and submit this form, along with completed NGA Notification of breeding and indicate all that apply: FI (Frozen Insemination); FS (Frozen Surgical); CI (Chilled Insemination); CS (Chilled Surgical) after the stud's name on the notification and in the space provided below. Please note any combinations involving AI (Artificial Insemination), AS (Artificial Surgical), Natural, CI or CS. Under no circumstances should F.I. or F.S. be combined with any other type of mating.

Both the notification of breeding and this supplement should be submitted within 10 days from date of breeding, and must be accompanied by the empty semen straws or vials used. An acknowledgment will be issued to the record owner of the semen.

Fee for F.I. breeding is \$30 for members and \$53 for Associate-members. Revised: 1/03