



# Fasig-Tipton

## VETERINARY WITHDRAWAL

Sale \_\_\_\_\_ Withdrawal Date \_\_\_\_\_

Horse's Name \_\_\_\_\_ Hip # \_\_\_\_\_

Owner \_\_\_\_\_

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 before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Signed \_\_\_\_\_

(Notary Public)

County \_\_\_\_\_ My commission expires \_\_\_\_\_