



The Welsh Pony and Cob Society, Africa
Die Walliese Ponie en Cob Genootskap, Afrika

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CERTIFICATION OF CASTRATION
(Complete the form in block letters please)

NAME OF GELDING	
REGISTRATION NUMBER	
DATE OF BIRTH	
DNA NUMBER	/
BRIEF DESCRIPTION OF COLOUR AND MARKINGS	

I hereby certify that on (Delete as appropriate)

- a) I removed both testicles, associated structures and a length of the adjoining spermatic cord from the above animal
- b) I examined the animal described above and found no external presence of testicles. I have found scar(s) on the scrotum suggesting that the animal has been castrated.

VETERINARY SURGEON	SIGNATURE	
	NAME	
	REGISTRATION NO.	R _ _ _ _
	TELEPHONE NO	
	ADDRESS	
	DATE	
	PRACTICE STAMP	
OWNER OF GELDING	NAME	
	SIGNATURE	
	TELEPHONE NUMBER	
	ADDRESS	

For office use only	Date recorded by NSBA	
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