



CONTINENTAL DORSET CLUB, INC

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EMBRYO TRANSFER FLUSH FORM

I hereby certify that ewe _____, registration number _____
(Flock Name & Number)
was flushed on _____ and _____ eggs were recovered and bred to ram
(Date) (Number)
_____, registration number _____.
(Flock Name & Number)

Recieipient ewes were implanted with _____ eggs on _____ and/or
(Number) (Date.
_____ eggs were frozen on _____.
(Number) (Date)

If applicable: I hereby sold _____ eggs of this flush to _____
(Number) (Breeder Name)
of _____ on _____.
(Town & State) (Date)

Technician Information:

Name: _____ Signature: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____

Owner of Ewe at the time of service: _____ Date: _____
(Signature)

Owner of Ram/semen as the time of service: _____ Date: _____
(Signature)

Mail completed form to the CDC Office at time of embryo collection or sale of embryos. If embryos are sold after the time of flush and a completed flush form is already on file with the CDC office, then the only signature required with that form submission will be the owner of the ewe at time of service as other signatures will already be on file with the CDC office with the original flush form.