MARE REGISTRATION (Shipped Semen)



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Stallion providing semen:
Stallion Owner:

Owner's Name			DATE	
Address				
City, State, Zip			Please check one: New Client Current Client, New animal	
Home Phone / Cell Phone				
Employer			Ship to:	
Work Phone E-mail			Address City, State, Zip	
Spouse			Phone	
Spouse's Employer				
Spouse's Work Phone			FedEx Account:	
Name of Mare				
Tattoo / ID#	Age	Sex	Breed	
Color		Ident	Identifying Marks	
Sire		Dam	Dam	
☐ Cash ☐ Check ☐ M	C/VISA Other:		f you are not paying prior to service) Expiration Date/ CID code	
Driver's License Number				
Credit Card Name / Billing Address (if different from above)				
I am the owner or agent of the m	are described above, and have the	e authority to exe	ecute this consent.	
I understand that semen collection been made. I also understand the	n fees and shipping charges will b at late fees will apply if the shippi	ne paid at the time ng container is no	ne such services are provided unless previous arrangements have ot returned in a timely manner.	
I agree to indemnify and hold you injuries due to care, custody, or h	harmless from and against any a andling.	and all liability aris	ising out of performance of any procedure, as well as any losses or	
I have read and understand this o	onsent.			
Signature of Legal Owner / Agent			Date	
Shipper (if applicable)			Date	