

2024 SHIPMENT/ON-SITE COLLECTION FORM FOR AFFILIATE STALLIONS

STALLION & STALLION OWNER INFORMATION

Stallion:	
	Year Contract is Valid For:
M	ARE & MARE OWNER INFORMATION
Mare Owners Name:	
Mare Name:	Mare's Registration #:
CLIENT WILL BE BRINGING MARE T	TO OUTBACK FOR AI? Yes or No (if no, fill out SHIP TO below)
SHIP TO INFORMATION *The addr	ress listed here is where semen will be sent to*
Veterinarian/Contact Name:	
Phone:	Email:
Cooled or Fresh Semen Contract:_	
Frozen Semen Contract:	
	would you like us to send in the first shipment?
_	ertain number of doses? Yes or No
If yes, how many doses can be sen	t before notifying you the stallion owner?
PAYMENT INFORMATION **ONLY	NEEDED IF WE ARE SHIPPING SEMEN**
Fedex Overnight \$350 Per Shipme	nt/ \$425 for Frozen Per Shipment
Credit Card Number:	
Exp Date:CVV:	_ Card Holders Name:
office prior to the semen request needicalls for semen and we do not have thi manage your own contracts and your sthe day before collection/shipment is needlations/confirmations must be confirmations must be confirmations with driving for time and efficiency purposes. If you arrange jump mare.	4 hours prior to shipment. Please make sure this form in on file with our ing fulfilled to ensure we have all information needed to ship. If the client is on file, we will tell them they need to call you as the stud owner first. If you stallion uses our facility to collect, we require this request to be on the books needed, and to have this form turned in prior to that time all alled in to our office at 208-454-5557 before 8am Mountain Time Monday, we thru stallions are required to have their stallion collected off a phantom or stallion has never been collected off of a phantom, we must know prior to
Stallion Owners Signature	Date: