

Stallion Collection Request Form

Mare Owner/Agent Information:

Date:		
Request Submitted By:		
Semen Shipping Address:		
Email:		
Phone:		
Hold At Fedex:	YES	NO
Signature Required:	YES	NO
Mare Name:		
Mare Owner:		
Anticipated Date of Collection		
Anticipated Date of Breeding:		
Stallion Requested:		
Stallion Owner Name:		
Stallion Owner Phone:		
Special Instructions:		

IMPORTANT NOTICE

By signing this form you are agreeing to be responsible for charges associated with services provided.

The Credit Card below will be charged at time of service or shortly thereafter.

Credit Card Information:

Name On Credit Card:		
Credit Card Type:		
Credit Card Number:		
Exp:		
CVV:		
Credit Card Billing Zip:		

Signature: _____

Date: _____