

21351 N US Highway 377 / Stephenville, TX 76401 / 254.485.8280 brazosvalleystallionstation.com office@bvsstx.com

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<b>IEW</b>	<b>CONTRACT:</b>	

**RETURN:** 

FOR OFFICE USE ONLY:				
Check/CC:	Contract #:			
Date Received:				
Breeding Fee Paid:	Farm Fee Paid:			

## 2024 CR GOTCHA COVERED ICSI BREEDING SERVICE CONTRACT ALL CONTRACTS/PAPERWORK MUST BE TO BVSS 72 HRS PRIOR TO ORDERING SEMEN OR PAY \$100 RUSH FEE

1.	I,(Owner), hereby reserves one bree	eding to CR GOTCHA	A COVERED AQHA Registration #5504209
	(6 PANEL N/N) for the Mare	, Reg. #	for the Breeding Fee of \$4,500, (stud
	fee does NOT apply if this is a return contract) plus the Offi	ce Fee of \$675 (at co	ontract signing) (Made payable to BVSS) during
	Jan 1st to Dec 31st of 2024. BVSS is to be notified of the number	per of embryos produc	ced as soon as the ICSI procedure is completed.
	Additional Embryos Fees are as follows: Advertised bree	eding fee of year e	ach embryo is utilized plus an Office Fee of
	\$300 each (all fees are due when recipient mare has a 60-c	day positive pregnanc	y check). Farm Fees are non-refundable. A Non-
	Refundable booking fee of \$1,000 will be due when returni	ing signed contract (b	ooking fee will be deducted from breeding fee).
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- 2. Please state what ICSI Facility will be used:
- **3.** The owner must attach a copy of the mare's registration papers to this agreement and provide all other information as requested. The Owner agrees to breed the mare specified. If a mare change/substitution is needed, the first substitution is free of charge. Each additional substitution will have a \$150 charge, unless extenuating circumstances apply. If that is the case, please give us a call.
- **4.** Mare shall be bred through the use of an intracytoplasmic sperm injection ("ICSI") procedure into the cytoplasm of a mature oocyte, which physically causes fertilization. Mare Owner may choose to work with any approved facility to have their mares' oocytes injected. Please see the attached list of approved facilities that will have access to the semen for the ICSI procedure.
- **5.** Frozen semen will be used for this contract unless fresh semen is available AND requested.
- **6.** Farm Fee as specified above shall be paid at the time this Contract is executed.
- 7. This contract provides for one (1) Breeder's Certificate. If multiple embryos are produced from this ICSI procedure, it will be the responsibility of the Mare Owner to notify BVSS of the number of embryos produced. If not reported by November 15th, the mare owner will be responsible for all late fees (\$100 per embryo). Stallion Breeding Reports are prepared immediately after the end of breeding season. If all embryos fail, a rebreed contract would be granted. A fine of \$1,000 will be issued for inseminating any other mare without notifying BVSS first of the change.
- **8.** If Mare Owner desires to do a frozen embryo, it will solely be their responsibility to pay all nomination fees. It is also the Mare Owner's responsibility to notify BVSS when the frozen embryo is utilized.
- **9.** TO OBTAIN A "BREEDER'S CERTIFICATE" YOU MUST NOTIFY BRAZOS VALLEY STALLION STATION LP OF THE BIRTH OF THE FOAL. CERTIFICATE WILL NOT BE ISSUED IF THE ACCOUNT HAS NOT BEEN PAID IN FULL. The Stallion owner is responsible for signing the Breeder's Certificates.
- **10.** If it should become necessary for BVSS to retain the services of an attorney to enforce its rights under the terms of this contract, including but not limited to the collection of any sums due, the Owner will pay BVSS all expenses and costs, including reasonable and necessary attorney's fees incurred by BVSS in enforcing this contract.
- **11.** Any dispute related to this contract will be governed by the laws of the State of Texas and venue of any dispute arising from this Contract shall be in Erath County, Texas.
- 12. This contract is non-transferable nor assignable without prior written consent from BVSS. Contracts that are not paid in full by December 31st of 2024 will be cancelled.
- **13.** All International and US Clients must pay with US Funds via Credit Card (3% Surcharge for MC, VISA, DISCOVER or 4.5% for AmEX), Wire Transfer (\$50 Surcharge) or check from a US Bank account.

CONTRACT OWNER:	For Office Use Only  BVSS/AGENT: Lisa Szwejbka
ADDRESS:	BVSS SIGNATURE:
CITY/STATE/ZIP:	ACCEPTANCE DATE:
PHONE#: E-MAIL:	
CONTRACT OWNER/AGENT SIGNATURE:	DATE:

\*\*\* ALL PAPERWORK MUST BE SUBMITTED 72 HOURS PRIOR TO ORDERING SEMEN \*\*\*

## **VETERINARIAN INFORMATION FOR SHIPPED SEMEN**

Veterinarian Clinic:			-	
Veterinarians' Name:				
Veterinarian Email:				
Shipping Address:			-	
City, State, Zip:				
Office Phone#:	Cell Phone#:			
NEAREST MAJOR AIRPORT:				
9	CREDIT CARD AU	THORIZATIO	N FORM	
			PRIOR TO ANY PROCEDURES ACCEPTED WITH A 4.5% PROCESS:	
THERE IS A 3% PROCESSIN	IG FEE FOR CREDIT CARD P	ATMENT AND AMEA	ACCEPTED WITH A 4.5 70 PROCESS.	ING FEE
Email for Insemination Feed				
(An email will be sent to thi	is address 14 days after th	he shipment goes ou	it for a pregnancy update.)	
BILLING EMAIL:				
Credit Card Type:	Credit Card	Number:		
Expiration I	Date (MO/YR):	Securit	y Code:	
Name on Credit Card	J:			
Billing Address:				
City, State, Zip:				
Signature:		Dat	re:	
Do you authoriz	e BVSS to use this cre	edit card for the	Breeding Fee & Farm Fee?	
Yes, Full Amo	ount When Contract is	s Received	•	ly

Do you authorize BVSS to use this credit card for future shipping charges (If necessary)?

Yes No