



2026 Stallion Breeding Contract

CR One Tuff Dual – AQHA #5884225

Standing at: Flynn Veterinary Clinic 31259 Clover Flat Road Lakeview, Oregon 97630	Owned by: Matt & Colleen Withers Paisley, Oregon	Contact: Matt & Colleen Withers Phone: 541-610-3134 Email: mattcolleenwithers@gmail.com
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SECTION 1 — MARE INFORMATION

This contract is made between **Matt and Colleen Withers** ("Stallion Owner") and the undersigned ("Mare Owner") for one breeding to the AQHA stallion **CR One Tuff Dual (AQHA #5884225)** during the **2026 breeding season (March 15 – July 1, 2026)** for the following mare:

- Registered Name: _____
- Breed/Registration #: _____
- DOB: _____ Color/Markings: _____
- Mare Owner Name: _____
- Phone: _____ Email: _____
- Address: _____

A copy of both sides of the mare's registration papers must accompany this contract.

SECTION 2 — FEES

Fee Type	Amount	Paid To	Notes
Breeding Fee	\$1,000	Matt & Colleen Withers	Due in full with signed contract
Chute Fee (cooled semen)	\$350	Flynn Veterinary Clinic	Required before first shipment
Shipping Fee (cooled semen)	\$150	Flynn Veterinary Clinic	Per shipment
Rebreed Fee (if applicable)	\$0	Matt & Colleen Withers	Applies only to approved rebreed (expires after 1 year)

Payment Methods:

- **Breeding fee & rebreed fee:** Cash or Check payable to Matt & Colleen Withers, or Venmo (@Colleen-Withers-2)
- **All veterinary, shipment & chute fees:** Cash, check, Venmo, or credit card (3.5% processing fee) payable to **Flynn Veterinary Clinic**

SECTION 3 — GENERAL TERMS

1. **Mare Condition:** Mare must be in sound breeding condition. Stallion Owner reserves the right to request reproductive evaluation or substitute mare.
2. **Non-Transferability:** This contract may not be sold or transferred without written approval.
3. **No Guarantee of Fertility:** Stallion Owner and Flynn Veterinary Clinic do not guarantee conception or semen quality at delivery.
4. **Incentive Programs:** Enrollment may vary year-to-year. Mare Owner is responsible for verifying eligibility.

SECTION 4 — LIVE FOAL GUARANTEE

A **Live Foal** is defined as one that stands and nurses without assistance.

If the mare aborts, fails to conceive, or the foal dies before standing/nursing, Mare Owner is entitled to a **rebreed the following season only**, provided:

- Flynn Quarter Horses is notified within **7 days**, and
- A veterinarian's written statement is provided.

Rebreed contracts do **not** include chute or shipping fees and are subject to a **rebreed fee**. Rebreed approvals expire after **one year**.

SECTION 5 — COLLECTION & SHIPPING (COOLED SEMEN)

- Collections occur **Monday, Wednesday, Friday**
- Orders must be placed **by 5 PM (Pacific Time) the day prior**
- Cancellation must occur **by 8 AM (Pacific Time) on collection day**
- On-farm mares have first priority

Shipping includes one dose; two doses may be shipped if available.

Flynn Veterinary Clinic is **not responsible** for delays, loss, or semen viability once shipped.

SECTION 7 — SHIPPING CONTAINER POLICY

ALL shipping containers, including Equitainers, MUST be returned within:

 **7 calendar days**

If not returned by day 8, Mare Owner authorizes full replacement cost to be charged to the payment method on file.

Damage, missing components, or failure to return will be billed at full cost.

SECTION 8 — LIABILITY

Matt & Colleen Withers, Flynn Veterinary Clinic, and their agents assume no responsibility for:

- Injury, sickness, or death of mare or foal
- Shipment errors, delays, handling, or fertility outcomes

Mare Owner accepts full risk.

SECTION 9 — GOVERNING LAW

This agreement shall be interpreted and enforced under the **laws of the State of Oregon**.

SECTION 10 — SIGNATURES

By signing below, Mare Owner agrees to all terms of this contract.

Mare Owner Signature: _____ Date: _____

Printed Name: _____

Stallion Owner:

Matt & Colleen Withers

By: _____ Date: _____

(Authorized Signature)

Please send this signed contract and all required documents to:

Matt & Colleen Withers

mattcolleenwithers@gmail.com

38374 Withers Ranch Rd.

Paisley, OR 97636

VETERINARIAN CONTACT FOR SEMEN DELIVERY

Clinic Name: _____

Veterinarian: _____

Email: _____ Phone: _____

Shipping Address: _____

Nearest Major Airport (optional): _____

CREDIT CARD INFORMATION (For charges made by Flynn Veterinary Clinic)

We accept Visa, cashier's check or personal check for payment of the Breeding Fees and Shipping and Collection Fees.

Please furnish the following information if you wish to pay with your credit card.

Charge to my: () Visa () Check

Card Number: _____ Authorization Code: _____

Name on Card (Please Print): _____ Expiration Date: _____

Card Holder's Signature: _____ Date: _____

