

FROZEN CANINE SEMEN RELEASE FORM

This form must be completed by the semen owner and submitted before frozen semen can be released. For transfers of 1-4 breeding units, **please submit this form with payment 3 days before requested shipping date. (Bulk Transfers require 30 day notice).**

We cannot guarantee delivery date without proper notice.

Semen Transfer fee of \$50, shipping charges, and \$200 deposit on the shipping tank which will be refunded within 5 days of return **must be paid prior to semen being shipped.**

Semen Owner is responsible for payment prior to shipment, shipping charges and breeding fees are to be worked out with the Bitches Owner. Collector will not take part in any disputes over payment for shipment or breeding fees.

Semen Owner Name: _____ Date: _____

Registered Dog Name: _____ Breed: _____

Number of Vials to be released: _____ Registry and Number: _____

Ship to:

Veterinary Facility: _____ Vet Phone # _____

Facility Address: _____

City _____ State _____ Zip Code _____

Bitch Owner Name _____ Phone # _____

Bitch Registered Name: _____ Bitch Registry/Number: _____

The semen shipment should be shipped to arrive on or before _____ (Date)

This shipment will be insured to cover the shipping tank replacement in the event of damage/loss during shipping. Additional insurance to cover the value of the semen may be purchased.

If desired, please indicate the amount you wish to insure the shipment \$ _____

Initial to decline _____

By my signature below, I authorize Lisa Hornish, Collector, to release and ship the semen requested on this form. I agree to all statements made in the document. I understand the Collector does not guarantee fertility or successful fertilization. I also understand the Collector is not responsible for services rendered by professionals of any other company.

Semen Owner Signature

Date

Lisa Hornish
11114 State Route 66, Oakwood, Ohio 45873
419-796-7287 / hornishgoldens@gmail.com