



GAUDI FRESH SEMEN REQUEST FORM

COLLECTION INFORMATION:

Horse Information:

Gaudi: _____

Mare Owner's Name: _____ Mare's Name: _____

Semen Request Information:

Date Request Made: _____

Collection Date Requested: _____

SHIPPING INFORMATION:

Name: _____

Street: _____ City: _____

Prov/State: _____ Postal/ZIP Code: _____

Telephone: _____ Email: _____

FedEx Account Number: _____

Address of FedEx Account Number: _____

Email this form to info@rhdressage.ca

YOU WILL RECEIVE A REPLY EMAIL CONFIRMING YOUR SEMEN ORDER.

**THE SEMEN REQUEST FORM MUST BE COMPLETELY FILLED
OUT BY 8 AM PACIFIC TIME 48 HOURS PRIOR TO REQUESTED
COLLECTION AND SHIPMENT OF FRESH SEMEN.**

4658 Wallace Hill Rd.
Kelowna, BC
V1W 4C2