



DEWEY SMITH QUARTER HORSES

2758 Township Road 55, Bellefontaine, Ohio 43311
Dewey Smith, Manager
682-597-2424

SHIPPED SEMEN STALLION SERVICE CONTRACT

This certifies that _____ herein referred to as the Mare Owner, has engaged in one breeding to _____ for the _____ breeding season at _____

for the following mare:

Mare name: _____ Breed _____ Reg. No. _____

Year foaled _____ Sire: _____ Dam: _____

Dewey Smith Quarter Horses, agent for the above named stallion, will herein be referred to as Breeder. This service subject to the following:

1. A **non-refundable** booking fee of \$ _____ is payable with this contract. The balance of \$ _____ and service charge for the first shipment (see #6 below) **are due before any semen will be shipped**. No contract will be approved until fees are paid.
2. A photocopy of the registration papers (both sides) shall be sent to the Breeder with this contract.
3. Shipping days will be every Monday, Wednesday, Friday, and Saturday beginning February 1 and ending May 1 of the year on this contract. We highly recommend sending your mare to a vet clinic or breeding farm for her heat cycle. They will coordinate optimum shipping times with us.
4. The Breeder **must be notified no later than 3 PM Eastern time on the day before the shipment is to be sent**. Semen will be shipped on collection days only on an "as available" basis. Mares sent to Breeder will receive preference for semen availability.
5. Shipped semen service charges will be as follows: (1) U.S. lower 48 states – shipped Federal Express Priority Overnight for \$250.00 per shipment or by airplane for \$300.00 per shipment. (2) Canadian shipments – Federal Express for \$275.00 per shipment or by airplane for \$325.00 per shipment. These charges **must** be paid prior to each shipment. Mare Owner is responsible for returning container immediately to the Breeder at Mare owner's expense. (Disposable containers do not have to be returned.)
6. The breeding season in force for this contract shall begin **February 1** and close **May 1** of the year on this contract.
7. Live foal guarantee: Live foal means the foal shall stand and nurse. It is understood that if the mare proves barren, aborts her foal, or if the foal is stillborn, a return breeding will be guaranteed for the following year only at Breeder's facility, providing proper notification is given. Proper notification is a written certification by a licensed veterinarian within seven days that the mare has slipped or produced a non-viable foal. Mare Owner verifies that such abortion or death did not result from any act or omission of the Owner. Rhino vaccinations must be administered as indicated by the individual drug manufacturer as the mare progresses through her pregnancy. **Failure to do this will void the Live Foal Guarantee.**
8. **Genetic Disease:** The Breeder shall be held harmless of any horse(s) with genetic diseases (HYPP)(HH).
9. Third year rebreeds are subject to an additional booking fee plus any increases in the breeding fee. No live foal guarantee on third year rebreeds.
10. **A breeder's certificate will be issued to Mare Owner after all expenses have been paid in full and upon notification of birth of foal.**
11. The signing of this contract entitles Breeder to charge ten percent annual interest on all past due invoices. Past due billing is defined as those amounts not paid within 30 (thirty) days of invoicing.
12. This contract is governed by the laws of the State of Florida. All accounts are due and payable in Manatee County Florida in U.S. dollars.
13. This is no Paint Color Guarantee.
14. This contract is not valid unless completed in full. When Mare Owner signs and returns the contract and booking fee to Breeder, Breeder will notify Mare Owner within 10 (ten) days of approval. Upon notification it will become a binding contract on both parties, subject to the above terms and conditions.

SHIPPING INFORMATION:

Ship to: _____

Address: _____

City/State/Zip: _____

Home Phone: _____

Bus. Phone: _____

FAX/Cell: _____

Email: _____

Preferred Major Airport: _____

OWNER INFORMATION:

Date: _____

Owner/Agent: _____

Address: _____

City/State/Zip: _____

Home Phone: _____

Work Phone: _____

Email: _____

FAX/Cell: _____

(sign) _____

(Owner/Authorized Agent)