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**BREEDING CONTRACT FOR FROZEN SEMEN**

This agreement confirms the reservation to the stallion **PACIFIC DES ESSARTS** (hereinafter referred to as the “Stallion”) for the **2024 breeding season** by the owner or lessee of the mare whose signature appears below (hereinafter referred to as the “Owner”). Owner hereby agrees to breed the mare \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ with the registration #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, registered in the following registry \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, (referred to as the “Mare”) Breeding will be done by using the **frozen semen** supplied by Spy Coast Farm (hereinafter referred to as “SCF”).

**Terms and Conditions:**

This is a non-transferable/non-assignable contract. In consideration of the mutual promises and covenants contained herein, and for valuable consideration, the parties hereto agree as follows:

1. Owner will provide a copy of Mare’s registration certificate with pedigree, a conformation picture of Mare, and a completed copy of the Mare Information Form.

\*\*\* These documents must accompany this contract in order to receive a breeding certificate at the end of the season. \*\*\*

1. **Dose(s) ordered with this contract cannot be used for ICSI**
2. Mare owner understands that the mare should be examined by a licensed veterinarian at 45 days and again at 60 days after the last day bred. Mare owner must then notify Spy Coast Farm of pregnancy status at that time.

\*\*\* Mare owner must **RETURN** the “Veterinary Verification Form” to SCF in order to receive a breeding certificate at the end of the season. \*\*\*

1. The breeding fee for the semen shall be in US dollars payable on a per dose basis as follows:
	1. **$1,000** per dose (“Purchase Price”) due in full prior to shipment of the frozen semen.
	2. Note 6% Kentucky sales tax applies to stud fee if breeding takes place in Kentucky.
	3. Each additional live foal produced from the breeding must pay an additional **$1,000** breeding fee per foal to receive a breeding certificate to register the foal(s).
	4. **There is NO Live Foal Guarantee. There shall be no refund of the Purchase Price.**
	5. Canadian breeders will be charged a $180 export fee for export paperwork

**Shipping & Handling**:

1. **Total cost for Next Day semen delivery and container return is $300**. The return shipping label will be included inside the container. All shipping costs will be charged on the owner’s credit card, unless the owner has a personal FedEx or UPS account number. **Same day shipping and Canadian Shipping will be at cost and can range from $500 to $2,000 depending on flights.**
2. Owner agrees that the shipping container shall be returned (i.e. received) to SCF within 3 days of receipt of semen via the same shipping service that delivered the shipment. **A late fee of $25.00 per day shall be assessed for each day beyond the 3-day return period for which the shipper is not returned. Should the frozen semen tank be damaged, lost, or not returned within five (5) business days, the Mare Owner’s credit card will be charged the cost of the tank $800.00**.
3. Each shipment requires liquid nitrogen to prepare semen container and transfer semen. **Owner shall pay $200 liquid nitrogen and handling fee for each shipment to prepare container** and agrees to add this amount to the fees for the semen**.**
4. SCF shall ship frozen semen from the stallion in viable condition when it leaves SCF to the Owner at the shipping destination supplied by the Owner. SCF holds no responsibility for shipping errors, misrouting, or mistreatment of shipper by shipping company, which might result in damages to frozen semen.
5. SCF assumes no responsibility for any loss or damage to the mare. Owner shall assume all responsibility for the condition of the Mare and shall bear all risk of loss or damage to the Mare whether by death, disease, injury, infection, or otherwise, and Owner further agrees to indemnify and hold harmless SCF, its officers employees and the Stallion Owner for any and all damages and liability.
6. This agreement may not be assigned or transferred by Owner without prior written consent of SCF.
7. This contract follows the above noted mare and may not be transferred to another mare or new owner without prior consent of SCF. Contract cannot be sold or reassigned to another party
8. This agreement, and all of its terms and conditions shall be binding upon and shall inure to the benefit if all the successors and permitted assigns of the Owner and SCF.
9. The validity, construction, and enforcement of this agreement shall be in accordance with and governed by the laws of the state of Kentucky, North Carolina or Florida.

 Stallion Breeding Fee (see price/# dose schedule): $1,000.00

 Quantity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Sales Tax (See note in section 3b): $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Liquid Nitrogen/handling fee: $200.00

 Round Trip Shipping: $300.00

 Total Due: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Owner/lessee signature Spy Coast Farm

X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please Print:**

Owner name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State:\_\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Payment Information:**

Visa/MasterCard/American Express #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Exp. Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Security Code:­­­­­­­ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Account Holder Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Account Billing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Semen Shipment Information:**

FedEx #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **If none, credit card above will be charged for shipping.**

Ship to: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_\_\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_\_\_\_

Telephone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail address (for tracking info):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If not submitting via email, please mail all checks and contracts to:

**Spy Coast Farm LLC, 3700 Newtown Pike Lexington, KY 40511**

**Tel: 859-280-3063 Fax: 859-554-3563**

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**MARE INFORMATION SHEET**

**Mare Information** Registered Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Alias:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Breed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Registration #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Height:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Color:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sire:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dam:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dam’s sire:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Breeder Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Owner Information**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Farm Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone Number(s) Cell:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Breeding History**

Mare’s current reproductive status: Maiden\_\_\_\_\_\_\_\_\_\_\_\_\_ Barren\_\_\_\_\_\_\_\_\_\_\_\_\_ In Foal\_\_\_\_\_\_\_\_\_\_\_\_ Number of pregnancies:\_\_\_\_\_\_\_\_\_\_\_\_\_ Live Births:\_\_\_\_\_\_\_\_\_\_\_\_\_ Early fetal loss(es):\_\_\_\_\_\_\_\_\_\_\_\_\_ Have you ever bred with shipped semen before? Yes/No Fresh Semen\_\_\_\_\_\_\_\_ Frozen Semen\_\_\_\_\_\_\_\_\_ Date of last uterine culture and cytology:\_\_\_\_\_\_\_\_ Results\_\_\_\_\_\_\_\_; Biopsy:\_\_\_\_\_\_\_\_ Results\_\_\_\_\_\_\_\_

**Veterinarian**

Veterinarian (handling breeding):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_ Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Will this breeding be used for embryo transfer?\_\_\_\_\_\_\_\_\_\_

This form and information provided will become part of your agreement with SCF and must be returned to SCF in order to receive a breeding certificate for your foal. Please review your answers for accuracy.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

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**VETERINARY VERIFICATION FORM**

I, the undersigned veterinarian, duly licensed by the state of \_\_\_\_\_do hereby attest that the following occurred: That at the following times and the following days, I artificially inseminated the mare, “\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_” with the semen of the stallion \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and said inseminations were carried out in accordance with standard veterinary practices.

Further, I hereby certify that after careful inspection, the mare inseminated is the mare described in the mare description box. Said inspection consisted of my comparing the written description of the mare with the mare I inseminated and found that the mare corresponds in every detail to said description.

Further, I certify that no other mare was inseminated with the stallion semen designated for this mare and that any excess thereto was promptly destroyed.

Further, I certify that I will indemnify and hold harmless Spy Coast Farm from any claims arising from the negligent improper or ineffective insemination by me.

Witness my hand and seal executed this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2024 under pains and penalties of perjury.

1. This form must be signed by the veterinarian on every occasion that the mare is inseminated.
2. This record must be signed when the mare is examined by a licensed veterinarian 60-65 days after the last day bred.
3. This record must be **RETURNED** to Spy Coast Farm when the mare is examined at 60-65 days after the last bred date.

**Insemination Date** **Veterinarian Signature**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby examined the mare described on this documented throughout the beginning of her pregnancy and finally 60-65 days after last day bred and found her to be:

In foal\_\_\_\_ Not in Foal \_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_ Veterinarian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In foal\_\_\_\_ Not in Foal \_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_ Veterinarian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In foal\_\_\_\_ Not in Foal\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_Veterinarian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In foal\_\_\_\_ Not in Foal\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_Veterinarian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In foal\_\_\_\_ Not in Foal\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_Veterinarian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mare \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_ Color \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sire\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dam\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Breed & Reg #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mare Owner Name and Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_