



**Stephanie Plote Performance Horses**

N3752 County Road K, Hager City, WI 54014  
 (715) 781-1192 ~ SPPerformanceHorses@Yahoo.com  
[www.SPPerformanceHorses.com](http://www.SPPerformanceHorses.com)

**Topline Equine Veterinary Care**

3087 130th Avenue, Glenwood City, WI 54013  
 (715) 684-9442 ~ ToplineEquineVetCare@Gmail.com  
[www.ToplineEquineVetCare.com](http://www.ToplineEquineVetCare.com)

**2024 SEMEN REQUEST FORM**

**Mare Owner Information**

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

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

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

**Mare Information**

Registered Name(s): \_\_\_\_\_

Breed Registry(ies): \_\_\_\_\_ Registration Number(s): \_\_\_\_\_

**Shipping Information**

*Mare Owner is responsible for all shipping costs directly with the shipping company (via CC or account number provided below)*

Shipping Preference:  FedEx  UPS  Airport

FedEx/UPS Account Number (if using Mare Owner's personal account for shipping): \_\_\_\_\_

Able To Receive Saturday Delivery:  Yes  No

Nearest Airport (if shipping Counter-to-Counter): \_\_\_\_\_

Authorized to Ship via Airport, at Mare's Veterinarian's Discretion:  Yes  No

**Semen Shipment Contact Information**

*(if different from Mare Owner Information above, such as when shipping directly to Vet Clinic)*

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

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

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

**Payment Information**

Credit Card Type:  VISA  Mastercard  Discover  AMEX

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CVC Code: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

**Mare Owner's Signature Required Below For Shipment of Semen**

By placement of my signature below, I, as the above named "Mare Owner", acknowledge and give my permission so that the above provided credit card information and/or shipping account information will be used to pay the collection fee to Topline Equine Veterinary Care (TEVC), as well as the chosen shipping company directly, for all shipping charges incurred, for each and all shipments of semen, as requested by myself, my veterinarian, or any other person designated by myself to manage the breeding of the above-named mare, in 2024. I acknowledge and agree that requests by individuals managing the breeding of the above-named mare are authorized to request shipment(s) of semen from the above-named stallion, as they see fit, and I shall not hold TEVC, its employees, or the stallion owner, accountable for any charges incurred by request(s) for shipment(s) of semen by anyone managing the breeding of the above-named mare. I acknowledge and agree that if the aforementioned credit card information is declined for any reason, that I must provide credit card information that is accepted before any semen is collected and/or shipped, and that if I fail to provide acceptable credit card information, that neither TEVC, its employees, nor the stallion owner, are responsible for payment of any incurred fees related to collection/shipment of semen and/or breeding of the above-named mare, by any veterinary clinic or other facility or individual providing such services to the above-named mare. I also acknowledge and agree that TEVC, its employees, and/or the stallion owner will make their best effort to collect and ship semen from the requested stallion, but any and all issues that arise as a result of request for collection being provided less than 24 hours prior to requested semen collection date, after semen collection, or during shipment of semen (including delay or loss of package) are not the responsibility of TEVC, its employees, or the stallion owner and I shall not attempt to hold them liable for any charges or losses incurred as a result of any issues arising that prevent or delay shipment of semen, or during the shipment of semen.

Mare Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_