

ROSENFELDT QUARTER HORSES

2253 New Washington Rd.

Bloomville, OH 44818

qtrsway@embarqmail.com

(419)284-0083, (402)650-9776

This certifies _____, hereafter referred to as Mare Owner, has engaged one service to _____, for the mare _____, registration number _____, breed _____, for the _____ season at _____ subject to the following:

1. **BOOKING FEE.** A non-refundable booking fee of _____ is due with this contract. A booking will not be guaranteed without the payment of the booking fee. The booking fee is included as part of the breeding fee.
2. **STALLION FEE.** The contract balance of _____, in addition to the collection fee will be due before any shipments of semen are shipped. No refund of any part of the stud fee will be made once the act of breeding of any kind has occurred. This stud fee is not allowed to be sold without stallion owners permission..
3. **LIVE FOAL GUARANTEE.** Live foal means the foal will stand, nurse, and live 24 hrs with no death threatening complications. It is understood that if the mare proves barren, aborts her foal, or if the foal is stillborn, a return season will be guaranteed the following year, providing proper notification is given. This is a two yr breeding contract beginning in _____. Proper notification shall be defined as follows: As soon as pregnancy is doubted, veterinary inspection to certify status, or as soon as foal dies. Contact is required with Stallion owner immediately. The entire breeding fee must be paid in full for this guarantee to be in effect.
4. **STALLION/MARE SUBSTITUTION.** It is further agreed that should the above named stallion die, be sold, or become unfit for service, or if the named mare dies before foaling, the Mare Owner may substitute another mare or breed the above named to another stallion owned by Rosenfeldt Quarter Horses that is agreed to by both the Stallion Owner and the Mare Owner.
5. This contract is good for one foal. Multiple foals from the same mare in the same breeding season will require a separate contract and breeding fee for each resulting foal.

COOLED SHIPPED SEMEN CONDITIONS

1. **SHIPPED SEMEN FEE.** Shipments/ Collection Fee will be _____ per shipment. A container fee of \$40 applies per shipment for disposable containers. If an Equitainer is used for transport, it is required the container be returned within

48 hrs. It is recommended that you insure containers for \$300 in case of loss of unit. Equitainers not returned will incur a \$300 replacement charge.

2. Shipped semen is routinely shipped FED-EX using overnight service. This charge is paid by the mare owner using a credit card. Semen must be ordered the day before shipment or 9am EST the day of shipment in order to receive next day delivery. Counter to counter shipments are available for an additional fee.
3. A Veterinarian should examine the mare for pregnancy between 14 and 30 days after the last breeding and the Stallion Owner notified. A breeder's certificate shall be issued to the mare owner upon notification of a live foal. No breeder certificate will be issued until any unpaid charges are cleared.

PLEASE NOTIFY Rosenfeldt Quarter Horses of the result of your mare's pregnancy check. We recommend the first check no later than 14 days after ovulation. This will allow enough time for your breeding manager to prepare your mare for another cycle's breeding if she is not in foal.

4. The Mare Owner assumes the unavoidable risks pertaining to the shipping container, risks associated with breeding efforts and breeding activity type loss.
5. The parties hereby further agree that this agreement will be transacted and strictly enforced pursuant to the Rule of Artificial Insemination and Transported Cooled Semen as described in the AQHA Handbook. As required by the aforesaid rule, the Mare Owner additionally agrees to return the completed copy of the Cooled Transported Semen Certificate, which will accompany each shipment of cooled shipped semen, to AQHA and the breeder within 15 days of insemination. The Mare Owner also agrees to abide by the rules of ANY registry approving the use of CTS for its breed.
6. It is the Stallion Owners responsibility to ship semen in a viable condition to the Mare Owner. All shipments will leave the premises having been analyzed for motility and sperm count. The semen has been previously analyzed and tested to be free from infectious disease. All procedures for collection and packaging meet or exceed industry standards. Once semen leaves the farm, it is in the hands of the shipper, and semen quality is dependant on that handling. The Mare Owner is responsible for filing claims to Rosenfeldt Quarter Horses to loss of time due to late, lost, or dead shipments. The semen may only be used on designated mare. Two (2) breeding doses will be shipped when possible with each shipment.
7. MARE RECORDS. A copy of the mare's registration papers is required to be on with Rosenfeldt Quarter Horses.

SIGNATURE OF MARE OWNER _____
Proposed first possible breeding date? _____ Is mare currently in foal ___ Due date ___

Mare Owner/Agent

Mares Name and Registration Number (and breed)

Mare Owner/Agent Billing Address

E-Mail Address

Address to which semen is to be shipped, Vet's name/phone

DAY AND NIGHT PHONE NUMBERS

Day _____ Night _____

Payment of stud fee to ROSENFELDT QUARTER HORSES
CREDIT CARD INFORMATION and AGREEMENT

Please furnish the following information prior to the 1st shipment. Please return original form signed to Rosenfeldt Quarter Horses, 2253 New Washington Rd, Bloomville, Oh 44818. Retain a copy for your records.

READ CAREFULLY BEFORE SIGNING: By signing or otherwise authorizing the charges reflected above, I agree to pay the full amount thereof in the event that such charges are declined or refused by my bank or credit provider. Additionally, I agree to pay interest at the rate of 12% per annum on all charges and attorneys fees and costs incurred in collection of charges.

I, _____, authorize Rosenfeldt Quarter Horses to charge shipping fees and any unpaid fees owed to my :

() Visa () Visa Checkcard () Mastercard

Card Number _____

Expiration Date: ____/____

Name on card (please print) _____

Address where CC bill is mailed _____

Card Holders Signature:

Date: _____