



FROZEN SEMEN SHIPMENT AUTHORIZATION

TO BE COMPLETED BY THE STALLION/SEMEN OWNER/AGENT

BREEDING SEASON YEAR: _____

Stallion : _____

Phone : _____

Stallion Owner/Agent : _____

Email: _____

Number of doses approved for shipment (per mare/year) : _____

Please check one of the following :

- Semen should be shipped on a per cycle basis at _____ doses per shipment/mare.
 Mare owner can receive the season's allotment of semen in one shipment.

Please check who will be responsible for the container deposit, PEH fees, and ordering the semen :

- A. Stallion Owner B. Mare Owner

Mare Owner : _____

Phone : _____

Address : _____

Fax : _____

Email : _____

Mare Name

Breed

Registration No.

1. _____

2. _____

3. _____

Semen Owner/Agent Signature - Very Important

Print Name

Date

NO SEMEN WILL BE SHIPPED PRIOR TO THE RECEIPT OF AUTHORIZATION FROM THE STALLION OWNER/AGENT AND PAYMENT OF DISTRIBUTION FEES BY RESPONSIBLE PARTY

Date Received by PEH _____ Initial : _____ FAX PHONE EMAIL