

Select Breeders Service Affiliate Laboratory Phone (209) 847-5951 Fax (209) 847-5954 Email sbs@pioneerequine.com

Total:	_
Dist:	Can:
Add. Stallions:	Sat. Delivery:
Rush Fee :	Add. Mares:

FROZEN SEMEN SHIPMENT REQUEST FORM

48 hour notice required to ship. Requests received by 5pm PST will be shipped within 2 business days.

ests received to ship the same day will incur a \$75 Rush Fee and will only be accommodated when no

Keq	uesis receivea to ship the same	FOR OFFICE USE O	NLY
CC Proce	essed Amt. Charged: _		Authorization Code:
Date & Tim	e Call Received:	Call Received By:	Name of Caller:
FedEx TRK	ζ # Out:	FedEx TRK # In:	Tank #:
☐ E-mail C	Confirmation	Stallion Owner E-mail:	
Mare Owner:			Mare Name:
			Age:
Phone #:			Breed:
E-mail			Registration #: Current Status:
Address:	IMPORTANT: YOUR E-MAIL AE SEND A FEDEX TRACKING NUM SHIPMENT.		(Maiden, Foaled, Barren, Not Bred)
Stallion:			# Doses: Frozen Canadian
Stallion Owner:			☐ Canadian-Rebreed
Phone #:			
Address:			
(No P.O. Boxes)			
Votovinovione		Phone #.	
Veterinarian:			
<u>IMPORTANT</u>	<u>: DIRECT SIGNATU</u>	URE WILL BE REQU	IRED UPON FEDEX DELIVERY
Anticipated Shipp	oing Date:		
SHIPMENT LEA Please return this tank for a longer p tank is received l to your credit ca	VING PEH. WE MUST H container by the Return D period, a NON-REFUNDAI back to PEH in the condit rd will be \$1,200.00, equ	IAVE A VALID CREDIT C. Date above. If you are going BLE daily rental fee of \$10 ion it was upon shipping fro ual to the replacement value	O YOUR CREDIT CARD PRIOR TO THE ARD TO SHIP ON THE DAY YOU REQUEST. to need to keep the 100 will be charged to your credit card until the 100 m PEH. The maximum fee that may be charged as of the tank. If the tank is returned with 100 ce charged for \$1,200.00 for replacement of
Credit Card	VISA MC M	Billing	Billing address same as shipping:
Name on Card Credit Card No.		Address:	
Security Code:	Expiration I	Date:	