

Jason & Sammy Jo Duby

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2021 Breeding Contract for Lost Creek Cat

Standing at: Goodell Veterinary Clinic

7509 South Sixth St., Klamath Falls, OR 97603 541-882-4556

I hereby agree on (date) _____ to breed the mare _____,
registration # _____ to **Lost Creek Cat** (reg. #5721709), for the 2021 breeding season.

I understand the breeding fee for 2021 is \$750. The balance of \$750 shall be payable a minimum of fifteen (15) days before breeding. Breeding fee is payable to Jason & Sammy Jo Duby.

____ I plan to use cooled shipped semen. There will be a charge of \$350 per shipment for cooled semen. I understand that the FedEx Priority Overnight expense is included in this fee. I also understand that I am responsible for returning the shipping container right away at the most economical shipping rate and that I am responsible for this expense. Shipped semen fees are to be paid directly to Goodell Veterinary Clinic.

Collection and shipping days are Monday, Wednesday and Friday (other days possible upon request). Semen will be sent FedEx Priority Overnight. Request for cooled transported semen must be made 24 hours prior to shipping time if at all possible. Call Goodell Veterinary Clinic to place the order. Cancellation must be made the morning of the shipment by 9:00am by calling Goodell Veterinary Clinic. 541-882-4556

____ I intend to take my mare to Goodell Veterinary Clinic in Klamath Falls and understand in addition to the mare related expenses I am responsible for the chute fee in the amount of \$200.

A LIVE FOAL GUARANTEE will only apply as follows:

A) A live foal is described as a new born foal which stands and nurses without assistance. In the event the above mare fails to produce a live foal from this breeding, or the foal produced from this breeding fails to live until January 1st of its yearling year, mare owner may rebreed the mare (or a substitute mare mutually agreed upon by mare and stallion owners) during the following breeding season only. This guarantee applies only if the mare owner (A) notifies the stallion owner within 72 hours after the time the mare did not produce a live foal, or foal dies; and (B) within 10 days after the mare owners notice, the mare owner provides the stallion owner with a statement from a licensed veterinarian substantiating same. Breeding fee will not be refunded. Should the mare not produce a live foal from this breeding, a rebreed will be honored the following year with a rebreed service charge of \$250. Jason & Sammy Jo Duby may require the rebreeding to be performed at the stallion station rather than through cooled semen.

B) For mares that DO NOT CONCEIVE using cooled semen, a rebreed will be honored the following breeding season with a rebreed. Jason & Sammy Jo Duby may require the rebreed to be performed at the stallion station rather than through cooled semen. Goodell Veterinary Clinic agrees to ship cooled semen as described above. If a mare fails to settle for any reason, the mare owner will hold Jason & Sammy Jo Duby and Goodell Veterinary Clinic harmless.

A "Breeder's Certificate" will be issued when the stallion owner has been notified that a live foal has been produced and all stallion fees and other expenses have been paid in full.

This contract shall be binding upon the parties hereto, upon execution hereof, and the same may not be altered, transferred to another party or amended, except by written mutual consent of the parties hereto. In addition it is understood there are no refunds of the breeding fees, shipping fees, etc.

A PHOTO COPY OF THE REGISTRATION PAPERS (BOTH SIDES) OF MARE MUST ACCOMPANY CONTRACT. OWNER RECORDED ON REGISTRATION CERTIFICATE WILL BE RECORDED ON THE BREEDING REPORT.

FOR COOLED SHIPPED SEMEN:

The veterinarian I will be using is: _____ Telephone _____

The shipping address for cooled transported semen is:

____ My mare will be taken to Goodell Veterinary Clinic for breeding. I will contact them directly to make arrangements.

Mare owner signature as listed on registration certificate _____ Date _____

Phones - home, work, cell _____ e-mail _____

Address (City, State, Zip) _____