

11. When the above named Mare Owner signs and returns one copy of this contract to the Breeder it will then be a binding contract on both parties, subject to the terms and conditions. Under Texas Law (Chapter 87, Civil Practice and Remedies Code). An equine professional is not liable for and injury to or the death of a participant in equine activities resulting from the inherit risks of equine activities. This contract is not valid unless completed in full.

12. All payments may be made by Check, Visa, Mastercard of American Express and all funds must be U.S. If paying by check leave Credit Card form blank. There will be a 3% fee added for using a credit card.

13. Owner must notify Tabor Ranch of the date of insemination and confirmation that mare is in foal.

Shipped Semen Information:

Please type of print clearly:
Street address to be shipped to:
Name: _____
Address: _____
City/State: _____ Zip Code _____
Phone# _____
Is this a hold address? ___ Yes ___ No
Veterinarian:
Name: _____
Address: _____
City/State: _____ Zip Code _____
Phone# _____

Stud fee must be paid in full before semen is shipped.
Fed Ex fee \$250.00 per shipment
Counter to Counter \$350.00
Collection fee included in above fees

MARE MUST BE INSEMINATED BY A LICENSED VETERINARIAN.
THE SEMEN MUST BE USED FOR DESIGNATED MARE ONLY.

CLOSEST AIRPORT: _____
2nd CLOSEST AIRPORT: _____
Mare Owner's/Agent's Signature: _____
Stallion Owner's Signature: _____

Farm Information:

Please complete if your mare is being bred at the Farm:
All mare care includes 24-hour mare watch.
Blacksmith and Veterinarian expense as necessary
Special Care available (By Quote): _____
Foaling out service available

SATURDAY DELIVERY SHIPMENTS:
Please contact Fed Ex at 1-800-238-5355 and verify if the receiving address has Saturday delivery as most DO NOT. If your receiving address does NOT, please locate the nearest Saturday HOLD location or alternate address you would like us to use. Please note that Saturday deliveries are only via Fed Ex Express shipments, not Fed Ex ground.

I, Mare Owner, accept the above agreement:

Signature - Mare Owner or Authorized Agent
Name: _____
Address: _____
City/State: _____
Zip Code _____
Phone# _____

Is Mare Insured Yes ___ No ___
Insurance Company Name _____
Policy Number _____
Emergency Number _____

Billing Address:

Name: _____
Address: _____
City/State: _____ Zip Code _____
Phone# _____

Please indicate what your Credit Card will paying for below:

Stallion Fee ___ Booking Fee ___ Farm Charges ___ Shipping Charges ___
Credit card information:

Cardholder's name _____ Card number _____

Card exp. Date _____ Card security code (on back) _____

Cardholder's billing address _____ Check here if same as above _____

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