

Cross Border Equine Center
Roger and Danelle Osinchuk
Route 103
Chester, VT 05143

Stallion Breeding/ Boarding Contract

THIS AGREEMENT is made by and between Cross Border Equine Center, Inc. (Roger and Danelle Osinchuk) and "Owner of stallion" _____.

1. FEES.

a. The stallion _____, owned by _____, will reside at Cross Border Equine Center, Inc. for standing and breeding. _____, agree to pay the following fees upon receiving a bill.

- Board (charged each night the stallion is at Cross Border Equine Center) \$22.00. covers feed and board
- Training to breeding phantom (if necessary) -\$500.00.
- A collection fee of \$225.00 for all collections. **All packages being shipped via Federal Express will have an additional shipping and handling fee. The total bill for cooled semen must be paid for in full prior to shipping.**
- A \$225.00 chute fee per mare on the farm. (covers handling, and collecting the stallion)
- In the case of any unforeseen fees (vet work, equipment, etc) the owners will be notified before billed.
 - ❖ **A deposit of \$500.00 is due when the stallion arrives, any other fees or payments are expected within 15 days of receiving a bill, all accounts must be paid before the stallion leaves the premises. No services will be provided on past due accounts.**

2. Health Requirements

The owners of Cross Border Equine Center (Roger and Danelle Osinchuk) require proof of a current negative coggins test, and a veterinarian certificate showing current freedom from disease or infection. **Cross Border Equine Center, Inc. reserves the right to refuse or at any time reject a stallion for any kind of dangerous behavior or if illness is suspected.**

3. **Wavier of Liability.** Cross Border Equine Center, Inc., veterinarians, and any other parties involved, shall be saved harmless of liability for any loss from fire, theft, escape, sickness, disease, injury, death or other harm suffered by stallion whether or not deemed to be caused by negligence. I understand that Cross Border Equine does not carry any form of insurance on my horse(s). I assume no liability for injury, sickness, or death of the horse, owners, or employees caused by the stallion.
4. Any illness or injury to the stallion will be immediately reported to the owner. Roger Osinchuk DVM will treat the stallion unless other arrangements have been made and the circumstances allow. If possible we would prefer our stallion to be treated by: *Veterinarian's Name:* _____ phone # _____ The stallion owner shall be responsible for all additional veterinary expenses. The breeding services will all be artificial.
5. **Termination.** At any time Cross Border Equine Center, Inc. may terminate this agreement for failure of the other party to meet any material terms of this agreement. This agreement is governed and shall be constructed under the laws of the state of *Vermont*.

Cross Border Equine Center
Roger and Danelle Osinchuk
Route 103
Chester, VT 05143
(stallion owner)

(date)

Stallion Collection Information:

Stallion is being collected for:

Mare Name & Registration

Number: _____

Mare Owner's Name, Address, & Phone #: _____

Type of Collection (Circle One)

Mare on Farm

Cooled and Shipped

Name, Address, & Phone for Facility receiving shipped semen: _____
