

Cross Border Equine Center, Inc.
Roger DVM and Danelle Osinchuk
P.O. Box 443
Chester, VT 05143
(802) 885-4883

Mare Breeding Contract

Roger and Danelle Osinchuk and Cross Border Equine Center, Inc. do set forth the following terms for the breeding of the mare:

Mare's Name: _____ Breed & Registration: _____

Age _____ Color _____ Year of Last
Foal _____.

Belonging to:

Owners Name: _____.

Address: _____.

Phone #: _____.

Beginning on the date of _____.

1. The basic veterinary fee per 21 day heat cycle for fresh or cooled semen is **\$336.00**. This includes as many ultrasounds and inseminations as needed. This does not include any medications, cultures, or laboratory fees. **Pregnancy checks and ultrasounds past 30 days are not included in the cycle fee. Also, any ultrasounds that are not done at Cross Border Equine Center are not included in the cycle fee.**
2. The mare will be boarded at Cross Border Equine Center, Inc. Mare care is **\$17.00** a day for dry mares, and **\$25.00** for wet mares. Board includes hay, grain, fresh water, and turnout. A **\$500.00** deposit is due when the mare arrives. Any remaining balance is due prior to the mare leaving the premises. No breeding services will be provided when there is a past due account.
3. The veterinary fee per 21 day heat cycle for frozen semen is a **MINIMUM of \$500.00**. This fee includes ultrasounds and inseminations. This fee does not include cultures, medications, or laboratories. **There is a \$20.00 per month storage fee on frozen semen. There is no insurance on stored semen and Cross Border Equine Center is not liable for lost semen. A deposit of \$500.00 is due on the mares arrival and any remaining balance must be paid prior to the mare leaving.**
4. Flu and Rhinopneumonitis vaccine must be given before the mare arrives. A general health exam must be performed and completed before the mare arrives.
5. Cross Border Equine Center, Inc. reserves the right to refuse or at any time reject a mare for any kind of dangerous behavior or if illness is suspected.
6. **Waiver 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 Mare and/or foal whether or not deemed to be caused by negligence. I understand that Cross Border Equine Center, Inc. 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 mare and/or foal.
7. Any illness or injury to the mare and/or foal will be immediately reported to the owner. Roger Osinchuk DVM will treat the mare unless other arrangements have been made and the circumstances allow. If possible we would prefer our mare and/or foal to be treated by:
Veterinarian's Name: _____.
Phone #: _____.
The mare owner is responsible for any additional veterinary expenses.

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8. The breeding will be by artificial insemination, the cost of the stallion service and all transported semen will be the responsibility of the mare owner
9. I certify that I am sole owner of the Mare or have authority to enter into this contract on behalf of the owner(s).

Signature of mare owner
date

Breeding Information:

Mare is being bred to:

Stallion Name: _____

Stallion Owner's Name: _____

Stallion Station Name & Address: _____

Phone # for ordering Semen: _____

Contact for ordering: _____