



**\*\*\* ALL PAPERWORK MUST BE SUBMITTED 72 HOURS PRIOR TO ORDERING SEMEN \*\*\***

## VETERINARIAN INFORMATION FOR SHIPPED SEMEN

Veterinarian Clinic: \_\_\_\_\_

Veterinarians' Name: \_\_\_\_\_

Veterinarian Email: \_\_\_\_\_

Shipping Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Office Phone#: \_\_\_\_\_ Cell Phone#: \_\_\_\_\_

NEAREST MAJOR AIRPORT: \_\_\_\_\_

## CREDIT CARD AUTHORIZATION FORM

**CREDIT CARD INFORMATION (A VALID CARD MUST BE ON FILE PRIOR TO ANY PROCEDURES DONE)**

**\*\*\*THERE IS A 3% PROCESSING FEE FOR CREDIT CARD PAYMENT AND AMEX ACCEPTED WITH A 4.5% PROCESSING FEE\*\***

Email for Insemination Feedback: \_\_\_\_\_

*(An email will be sent to this address 14 days after the shipment goes out for a pregnancy update.)*

**BILLING EMAIL:** \_\_\_\_\_

**Credit Card Type:** \_\_\_\_\_ **Credit Card Number:** \_\_\_\_\_

**Expiration Date (MO/YR):** \_\_\_\_\_ **Security Code:** \_\_\_\_\_

**Name on Credit Card:** \_\_\_\_\_

**Billing Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Do you authorize BVSS to use this credit card for the Breeding Fee & Farm Fee?**

Yes, Full Amount When Contract is Received

Yes, but Booking Fee Only

No, I will send a check

**Do you authorize BVSS to use this credit card for future shipping charges (If necessary)?**

Yes

No