

brazosvalleystallionstation.com office@bvsstx.com

FOR OFFICE USE ONLY:			
Check/CC:	Contract #:		
Date Received:			
Breeding Fee Paid:	Farm Fee Paid:		

	2025 STORYTELER ICSI BE ALL CONTRACTS/PAPERWORK MUST BE TO BVSS 72	REEDING SERVICE CONTRACT  HRS PRIOR TO ORDERING SEMEN OR PAY \$100 RUSH FEE				
1.	I,(Owner), hereby reserves one breed	ling to STORYTELER AQHA Registration #6095301 (7 PANEL: N/N)				
	returning signed contract (booking fee will be deducted from bre of embryos produced as soon as the ICSI procedure is completed	, Reg. # for the Breeding Fee of \$4,500 plus and the Dec 31 <sup>st</sup> of 2025. A Non-Refundable booking fee of \$1,000 will be due when seding fee). All fees are due prior to ICSI. BVSS is to be notified of the number d. Additional Embryos Fees are as follows: <b>Advertised breeding fee of year</b> I fees are due when recipient mare has a 60-day positive pregnancy check).				
2.	Please state what ICSI Facility will be used:					
3.	The owner must attach a copy of the mare's registration papers to this agreement and provide all other information as requested. The Own agrees to breed the mare specified. If a mare change/substitution is needed, the first substitution is free of charge. Each additional substitution will have a \$150 charge, unless extenuating circumstances apply. If that is the case, please give us a call.					
	Mare shall be bred through the use of an intracytoplasmic sperm injection ("ICSI") procedure into the cytoplasm of a mature oocyte, which physically causes fertilization. Mare Owner may choose to work with any approved facility to have their mares' oocytes injected. Please see the attached list of approved facilities that will have access to the semen for the ICSI procedure.					
5.	Frozen semen will be used for this contract unless fresh semen i	·				
		ole embryos are produced from this ICSI procedure, it will be the responsibility roduced. If not reported by November 15th, the mare owner will be				
	, , ,	reeding Reports are prepared immediately after the end of breeding season. I				
	•	all embryos fail, a rebreed contract would be granted. <b>A fine of \$1,000 will be issued for injecting oocyte(s) on any other mare withou</b> t notifying BVSS first of the change or injecting oocyte(s) on any mare without a current paid (new or rebreed) contract in place				
6.	If Mare Owner desires to vitrify the embryo(s), it will solely be their responsibility to pay all nomination fees. It is also the Mare Owner's responsibility to notify BVSS when the frozen embryo is utilized.					
7.		I date when embryos are produced. If all embryos have not been utilized within				
	the 2 years of this contract, all rebreed rights will be null and voice	d, even if there are embryos still in storage. All rebreeds will require a statemen				
	from the Veterinarian, via email to BVSS (office@bvsstx.com) be	efore a rebreed contract will be issued.				
8.	TO OBTAIN A "BREEDER'S CERTIFICATE" YOU MUST NOTIFY BRAZOS VALLEY STALLION STATION LP OF THE BIRTH OF THE FOR CERTIFICATE WILL NOT BE ISSUED IF THE ACCOUNT HAS NOT BEEN PAID IN FULL. The Stallion owner is responsible for signing the Breeder's Certificates.					
9.	If it should become necessary for BVSS to retain the services of an attorney to enforce its rights under the terms of this contract, including but not limited to the collection of any sums due, the Owner will pay BVSS all expenses and costs, including reasonable and necessary attorney's fees incurred by BVSS in enforcing this contract.					
	shall be in Erath County, Texas.	s of the State of Texas and venue of any dispute arising from this Contract				
	December 31st of 2025 will be cancelled.	ritten consent from BVSS. <b>Contracts that are not paid in full by</b>				
	and records needed to the stallion owner after which wil	<del>_</del>				
13	Transfer (\$50 Surcharge) or check from a US Bank account.	edit Card (3% Surcharge for MC, VISA, DISCOVER or 4.5% for AmEX), Wire				
CON	TRACT OWNER:	For Office Use Only  BVSS/AGENT: Lisa Szwejbka				
ADDF	RESS:	BVSS SIGNATURE:				
CITY	/STATE/ZIP:	ACCEPTANCE DATE:				
PHO	NE#: E-MAIL:					
CON	ITRACT OWNER/AGENT SIGNATURE:	DATE:				

\*\*\* 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:				
9	CREDIT CARD AU	THORIZATIO	N FORM	
			PRIOR TO ANY PROCEDURES ACCEPTED WITH A 4.5% PROCESS:	
THERE IS A 3% PROCESSIN	IG FEE FOR CREDIT CARD P	ATMENT AND AMEA	ACCEPTED WITH A 4.5 70 PROCESS.	ING FEE
Email for Insemination Feed				
(An email will be sent to thi	is address 14 days after th	he shipment goes ou	it for a pregnancy update.)	
BILLING EMAIL:				
Credit Card Type:	Credit Card	Number:		
Expiration I	Date (MO/YR):	Securit	y Code:	
Name on Credit Card	J:			
Billing Address:				
City, State, Zip:				
Signature:		Dat	re:	
Do you authoriz	e BVSS to use this cre	edit card for the	Breeding Fee & Farm Fee?	
Yes, Full Amo	ount When Contract is	s Received	•	ly

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

Yes No