



BAY CITY VETERINARY CLINIC & EQUINE HOSPITAL
4501 7th Street, Bay City, TX 77414

Clinic Phone: 979-245-6364 - Direct Line: 979-245-6416

Stallion Manager: Heidi Pruett Order #: 281-732-2604 Email: hpruett.bcvc@gmail.com

THOMAS E HUGHES

AQHA #4342973

5 Panel N/N

2025 FROZEN SEMEN ONLY CONTRACT

- Bay City Veterinary Clinic & Equine Hospital (BCVC) hereby reserves one breeding to **Thomas E Hughes** AQHA #4342973 (5 Panel N/N) for the Mare _____ Reg # _____ for the 2025 breeding season **beginning February 3, 2025, and ending June 30, 2025**. The owner's name as listed on the papers is _____.
- Mare owner must attach a copy of the mare's registration papers to this agreement and provide all other information as requested. The mare owner agrees to use the semen shipped solely to breed the mare specified.
- Mare owner agrees to pay the fee of **\$1,600.00** (Booking/Shipping fees included in first dose) If a donated or discounted breeding, the **\$600** Booking/Shipping fee is due payable to **BCVC**.
- **Frozen semen only will be available for this breeding contract.** Booking/Shipping Fees are non-refundable.
- The Breeding Fee as specified above must be paid prior to the first shipment of semen. The 1st shipment of frozen semen via Fed Ex priority Overnight is included in the breeding fee. Additional Fed Ex shipments are **\$450** each. No airline shipments are available for this contract.
- Mare owner's requesting frozen semen should expect to receive one dose. Any unused frozen semen remains the property of the stallion owner and must be returned to BCVC at the mare owners' expense.
- Should any foal which is born to the mare, pursuant to this contract, not stand and nurse, the mare owner shall be entitled to a re-breed the following year only for this mare. **THIS RE-BREED SHALL APPLY ONLY IF BCVC IS NOTIFIED WITHIN ONE (1) WEEK OF THE DEATH OF THE FOAL. THIS NOTIFICATION MUST BE ACCOMPANIED BY A STATEMENT FROM A LICENSED VETERINARIAN, STATING THE CAUSE OF DEATH.** BCVC's sole liability and obligation for any foal that is born to the mare but does not stand and nurse, shall be the granting of a re-breed. Such breeding shall apply to the Breeding Fee only and only to the season immediately following the season set forth in this contract. The mare owner shall pay Booking/Shipping fees for the mare, under the same terms set forth in this contract.
- **2nd year re-breeds will be at the discretion of the stallion owner, additional breeding fees may apply.**
- This contract provides for one (1) Breeder's Certificate. If multiple embryos are retrieved from one breeding additional contracts and/or breeding fees will be at the discretion of the stallion owner, it will be the responsibility of the Mare Owner to notify BCVC of number transferred. **If multiple embryos are desired and it takes more than one breeding, an additional contract is required for each breeding. Please notify BCVC with insemination dates and status (In Foal/Open) of your mare at the end of the breeding season.** Stallion Breeding Reports are prepared immediately after the end of breeding season.

- If Mare Owner desires to do a **frozen embryo**, it will solely be their responsibility to pay all nomination fees. **It is also the Mare Owner's responsibility to notify BCVC when the embryo is frozen and when utilized.**
- TO OBTAIN A "BREEDER'S CERTIFICATE" YOU MUST NOTIFY **Heidi Pruett @ BAY CITY VETERINARY CLINIC AND EQUINE HOSPITAL OF THE BIRTH OF THE FOAL**. 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.
- Mare owner shall hold Stallion Owner and BCVC harmless for any accident, injury, theft, disease, sickness, or death suffered by the mare and/or foal, or any other cause of action whatsoever arising out of or connected in any way with Shipped Semen Breeding. This includes but is not limited to, any claims of damage, loss or injury that may occur to any person or personal property.
- If it should become necessary for BCVC 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 BCVC all expenses and costs, including reasonable and necessary attorney's fees incurred by BCVC in enforcing this contract.
- Any dispute related to this contract will be governed by the laws of the State of Texas and venue of any dispute arising from this Contract shall be in Matagorda County, Bay City, Texas.
- This contract is non-transferable nor assignable without prior written consent from BCVC.
- **TO ORDER SEMEN TEXT HEIDI PRUETT 281-732-2604 Before 5pm. Must get a return text message within 1 hour.** If no response, then make sure to text again or call **979-429-7008 leave message.**
- ALL Vapor Shipper MUST BE RETURNED to BCVC or FROZEN SEMEN STORAGE FACILITY, at the mare owner's expense within 5 days of shipment. If the Vapor Shipper is NOT returned, the Mare Owner will be charged for replacement value.
- All International and US Clients must pay with US Funds via Credit Card (3% Surcharge for MC, VISA, DISCOVER or 4.5% for American Express), Wire Transfer (\$50 Surcharge) or check from a US Bank account. All shipping and charge fees are subject to change. Payments must be made in full prior to semen being shipped.

MARE OWNER INFORMSTION:

Printed Name: _____

Address: _____

Email: _____

Phone #: _____

 Credit Card Number exp. date cvv code billing zip code for Credit Card

 Name on Card Type of Card

Stallion: **THOMAS E HUGHES**

 Stud fee Booking/Chute fee Shipments (Please mark what you want charged to credit card)

Mare Owner Signature: _____

THOMAS E HUGHES
AQHA #4342973
5 Panel Negative
2025 FROZEN SEMEN CONTRACT
INFORMATION SHEET

Name of Mare: _____

Breed: _____ Registration # _____

Contact Name: _____
(Person doing your breeding, either veterinarian, technician, or farm manager)

Contact Phone number: _____

Contact email required: _____

Ship semen to the following address:

SIGNATURE OF MARE OWNER: _____

Printed Name of Mare Owner: _____ Date _____

BCVC Approved by: _____ Date _____

PLEASE SIGN AND RETURN ALL PAGES OF THE CONTRACT. **BCVC** WILL SIGN AND RETURN APPROVED COPY OF YOUR CONTRACT VIA EMAIL SO PLEASE PROVIDE CORRECT EMAIL ADDRESS.