



21351 N US Hwy 377 Stephenville, TX 76401

brazosvalleystallionstation@gmail.com
www.brazosvalleystallionstation.com

PH: (254)485-8280 FAX: (866)264-2942

2017 ON FARM BREEDING CONTRACT
SO FAMOUS

- 1. BRAZOS VALLEY STALLION STATION LP (BVSS) hereby reserves one breeding to SO FAMOUS, AQHA Registration #5407039 for the Mare...
2. Owner must attach a copy of the mare's registration papers to this contract and provide all other information as requested.
3. If the Stallion should die or become unfit for service prior to the mare getting in foal, the Breeding Fee shall be refunded.
4. If your mare will be an embryo donor, BVSS can perform the embryo flush and transport the embryo to a separate embryo transfer facility of the Mare Owner's choice..
5. BVSS will diligently try to settle the mare from Feb 1, 2017 through July 15, 2017.
6. The Processing Fee is non-refundable. The Processing Fee of \$350 includes collection of the stallion and record keeping.
7. The Mare must be healthy and in sound breeding condition.
8. A current (within 12 months) negative Coggins is required.
9. BVSS veterinarians will check the mare for normal breeding conditions and perform other such services as BVSS, in its sole judgment, deems necessary.
10. The Owner shall pay for the feeding, boarding and care of the mare and/or foal as follows:
11. Accounts will be billed monthly on or about the first of the month.
12. Should any foal which is born to the mare, pursuant to this contract, not stand and suck, the Owner shall be entitled to a re-breed the following year only for this mare.
13. If the mare proves not to be in foal as a result of this contract or if the foal does not stand and suck, BVSS has the option to re-breed the mare the following year only.
14. This contract provides for one (1) Breeder's Certificate.
15. TO OBTAIN A "BREEDER'S CERTIFICATE" YOU MUST NOTIFY BRAZOS VALLEY STALLION STATION LP OF THE BIRTH OF THE FOAL.
16. Owner shall hold Stallion Owner and BVSS harmless for any accident, injury, theft, disease, sickness, or death suffered by the mare and/or foal.
17. In the event of any injury or death to the mare and/or foal, the Owner will look solely to his/her own insurance.
18. If it should become necessary for BVSS to retain the services of an attorney to enforce its rights under the terms of this contract.
19. 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 Erath County, Texas.
20. This contract is non-transferable nor assignable without prior written consent from BVSS.
21. All International Clients or US Clients must pay with US Funds via Credit Card (3% Surcharge for MC, VISA, DISCOVER or 4.5% AmEX), Wire Transfer (\$50 Surcharge) or check from a US Bank account.

MARE OWNER: _____ BVSS/AGENT: _____ Jeremy Barwick _____

ADDRESS: _____ BVSS SIGNATURE: _____

CITY/STATE/ZIP: _____ ACCEPTANCE DATE: _____

Phone#: _____ E-mail: _____

Owner/Agent Signature: _____ Date: _____



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2017 MARE OWNER INFORMATION SHEET

****RETURN THIS FORM WITH BREEDING CONTRACT OR UPON ARRIVAL OF MARE TO BVSS****

NAME OF MARE: _____ **STALLION CHOICE:** _____

Carry (y/n): _____ Embryo Transfer (y/n): _____ Frozen Embryo (y/n): _____

MARE OWNER INFORMATION:

Name of Owner: _____

Billing Address: _____

City, State, Zip: _____

Cell Phone#: _____ Home Phone#: _____

E-mail Address: _____

Insurance Company (if applicable): _____ Phone#: _____

VETERINARIAN INFORMATION (for shipped semen)

Veterinarian Name: _____

Veterinarian Clinic: _____

Shipping Address: _____

City, State, Zip: _____

Office Phone#: _____ Cell Phone#: _____

NEAREST MAJOR AIRPORT: _____

CREDIT CARD INFORMATION

VISA, MASTERCARD, DISCOVER ACCEPTED
THERE IS A 3% PROCESSING FEE FOR CREDIT CARD PAYMENT AND
AMEX ACCEPTED WITH A 4.5% PROCESSING FEE

Credit Card Type: _____ Credit Card Number: _____

Expiration Date (MO/YR): _____ Security Code: _____

Name on Credit Card: _____

Billing Address: _____

City, State, Zip: _____

Signature Authorization: _____ Date: _____



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2017 ON FARM CHECK-IN SHEET

****RETURN THIS FORM WITH BREEDING CONTRACT OR UPON ARRIVAL OF MARE TO BVSS****

NAME OF MARE: _____

MARE OWNER: _____

Wet Stall (\$20) _____ Dry Stall (\$18) _____ Show Stall (\$25) _____ Pasture (\$17 wet or dry) _____

Permission to turn out in pasture with other mares at later date (y/n) _____

Embryo Transfer (y/n) _____ Multiple Embryos (y/n) _____ Frozen Embryo (y/n) _____

If Embryo Transfer: Flush at BVSS (y/n) _____

If yes, name of Embryo Transfer Clinic to receive embryo: _____

******CALL AT LEAST ONE DAY IN ADVANCE TO LET US KNOW WHEN YOUR MARE WILL BE ARRIVING******

If mare is arriving to foal out:

Last Breeding Date in 2016 _____ Sire: _____

Is mare accompanied by a foal? (y/n) _____ Date foaled _____ foal sex _____ color _____

Foal Description: _____

Sire of foal: _____

Has foal received PLASMA? (y/n) _____ If yes, has foal received Plasma booster? (y/n) _____ date _____

Permission for Foal to Receive Plasma (y/n) _____

VACCINATION HISTORY (Please provide **dates** administered if mare is CURRENT.)

If this information is not available when mare arrives, we will perform the necessary vaccinations. The overall health of your mare is of the utmost importance to us!

_____ Negative Coggins---bring a copy of your current coggins (dated within 12 months)
(If mare arrives without a current coggins, we will perform one the day she arrives.)

_____ Strep, brand name used: _____ Pneumabort K

_____ EEE/WEE/Tetanus _____ Flu-Rhino _____ West Nile _____ Rabies

_____ De-wormer Type used _____

_____ Last Farrier (trim/half shod/shod/special) _____
(A farrier comes to BVSS to provide routine hoof care for your mare.)

Has your mare ever been on Regumate? y/n _____ If yes, when and dosage: _____

Has your mare ever been on Pergolide? y/n _____ If yes, when and dosage: _____

Pertinent Health or Reproduction Information: _____

SPECIAL FEEDING OR EXERCISE NEEDS: _____

Office Manager:
Trish McClurg
(254)485-8280



Breeding Manager:
Debbie Patterson
(817)304-0513

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2017 Collection Schedule

brazosvalleystallionstation@gmail.com

Feb 1 - July 15

www.brazosvalleystallionstation.com

Shipping Boxes **MUST** be Returned within 5 Days *** Please be advised: On Farm Mares have Priority over SS Mares

February

SUN	MON	TUES	WED	THURS	FRI	SAT
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28				

Collection Days are Shaded

March

SUN	MON	TUES	WED	THURS	FRI	SAT
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

Collection Days are Shaded

April

SUN	MON	TUES	WED	THURS	FRI	SAT
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

May

SUN	MON	TUES	WED	THURS	FRI	SAT
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

June

SUN	MON	TUES	WED	THURS	FRI	SAT
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

July

SUN	MON	TUES	WED	THURS	FRI	SAT
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

Please notify BVSS with the status of your mare by the end of July!!!

Please call BVSS at (254)485-8280 to order semen the day prior to collection day.
Shipped semen cancellations must be made prior to 8am CST on collection days.