

FROZEN SEMEN RELEASE AUTHORITY

I _____ BEING THE OWNER / AGENT FOR THE

FROZEN SEMEN FROM THE STALLION _____

AUTHORISE EQUINETICS TO RELEASE FROZEN SEMEN TO MARE OWNER

MARE OWNERS NAME

TO BE USED WITH THE MARE _____

NAME OF MARE

NUMBER OF DOSES _____

STRAWS PER DOSE _____

CONTACT DETAILS FOR RELEASE _____

NAME

SIGNATURE

DATE

NOTES :

PLEASE RETURN FORM TO : equinetics@outlook.com