

**Oswood Stallion Station**

**1400 Old Garner Rd. \* Weatherford, TX 76088**

**(817) 599-4560 (817) 599-4564 fax [oswoodstallionst@aol.com](mailto:oswoodstallionst@aol.com) [www.oswoodstallionstation.com](http://www.oswoodstallionstation.com)**

**Frozen Shipped Semen Information**

**Contract Type:** **New** **Rebreed** *(please circle one)*

**Mare:** \_\_\_\_\_ **Stallion:** \_\_\_\_\_

AQHA/APHA Registration #: \_\_\_\_\_ *(Please attach a copy of registration papers)*

**Is this an embryo transfer breeding?** **Yes** **No** *(please circle one)*

**Mare Owner:**

Name: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Phone: (Home) \_\_\_\_\_

(Work) \_\_\_\_\_

(Mobile) \_\_\_\_\_

(Fax) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**Billing address:** *(if different than mare owner)*

Name: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Phone: (Home) \_\_\_\_\_

(Work) \_\_\_\_\_

(Mobile) \_\_\_\_\_

(Fax) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**Shipping Information**

*(Must be a physical address, NO PO Boxes)*

Ship To: \_\_\_\_\_

Contact: \_\_\_\_\_

Vet *(if different):* \_\_\_\_\_

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

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

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

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

Signature Required **Yes** **No** *(Circle One)*

**FedEx Saturday Delivery Address**

*(if different)*

Ship To: \_\_\_\_\_

Contact: \_\_\_\_\_

Vet *(if different):* \_\_\_\_\_

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

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

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

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

Signature Required **Yes** **No** *(Circle One)*

**Closest Major Airport:**

Airport: \_\_\_\_\_ Airline: \_\_\_\_\_ Airport Code: \_\_\_\_\_

***I hereby authorize Oswood Stallion Station, Inc. to charge the following credit card for charges not prepaid:***

Circle One: **VISA** **MasterCard** **AmEx**

Name as appears on card: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ 3 or 4 digit CCV# \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_