



Rogue Valley Equine Hospital
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William W. Ferguson, D.V.M.
 Thomas R. Timmons, D.V.M.
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Stallion Agreement

Owner _____ Date _____

Stallion _____ Age _____ Breed _____

Date of last vaccinations:

Influenza: _____ Rhino: _____ Tetanus: _____ PHF: _____ West Nile: _____
 Eastern & Western Encephalomyelitis: _____ Strangles: _____ Worming: _____ EIA _____

I, the undersigned, do hereby certify I am the owner or leasee of the animal identified herein and I hereby authorize the ROGUE VALLEY EQUINE HOSPITAL to evaluate, assess, treat and perform collection procedures which are deemed necessary by the attending veterinarian. I authorize reasonable urgent medical procedures as deemed necessary in the event of an emergency.

The undersigned agrees results can not be guaranteed and hereby releases RVEH and staff of liability from any complications or injuries that arise from handling or collecting the stallion named above. It is RVEH policy that only employees of RVEH handle horses during procedures. A deposit of \$350 for each RVEH equitainer shipped is required before stallion is collected. Equitainers are to be returned to RVEH within three days of receipt overnight shipping. A \$50 a day late fee will be charged for all equitainers not returned.

Payment Policy

All collection and shipping fees are due at the time of admission. I (the owner or duly authorized agent thereof) agree to accept responsibility for full payment of all collection, treatments and services rendered by RVEH. I understand breeding is an elective procedure.

I agree to pay the balance of the fees due before the release of the horse from RVEH Reproduction Center. If it is necessary to bring an action to compel the payment of fees or costs, the undersigned shall pay all costs incurred in collection of the debt and reasonable attorney fees.

Admittance – Visiting – Discharge Policy

I understand no horse will be brought to RVEH Reproduction Center without prior agreement as to time and date. All horses entering the reproduction center will be current on vaccinations and de-worming. (Influenza and Rhinopneumonitis within the last 90 days and less than 365 days for Tetanus Toxoid) All horses not current on vaccinations and de-worming will be brought up to date and the owner will be invoiced.

I hereby state I have read and understood this authorization and release and acknowledge receipt of a copy thereof. By signing as agent of the owner, the undersigned warrants he/she has authority to bond the owner.

AUTHORIZATION & RELEASE: I acknowledge that I understand the estimated fee quoted to me for services rendered by RVEH is approximate.

_____ Owner/Agent