



FROZEN CANINE SEMEN RELEASE FORM

INTERNATIONAL CANINE SEMEN BANK – FLORIDA



105 East Alfred St.
Lake Alfred, Florida 38850
863-956-5700 phone 863-956-8420 fax
laahrepro@gmail.com

FROZEN CANINE SEMEN RELEASE FORM

This form is to be completed, signed, and dated by the semen owner or authorized representative whenever he/she wishes to have frozen semen used for insemination. Please read through carefully and fill out **BOTH** pages. If the semen is to be shipped to another facility, please plan for this form to reach our office at least 3 business days before the requested shipping date. Shipping is usually paid by the bitch owner. The semen owner is however ultimately responsible for all costs in the event the bitch owner fails to return the tank. This form IS NOT A TRANSFER OF OWNERSHIP. A COPY OF DOG'S REGISTRATION MUST BE ON FILE PRIOR TO SEMEN RELEASE. SEMEN CAN ONLY BE RELEASED BY OWNER/CO-OWNER OR AUTHORIZED REPRESENTATIVE OF DOG AT TIME OF COLLECTION OR ICSB-FL HAS A COMPLETED TRANSFER OF OWNERSHIP SIGNED BY ALL DOG OWNERS.

Stored Semen Information		
Registered Name:	Call Name:	
Breed:	Color:	
Registry and Number:		
Owner Contact Information		
Printed Name of Owner:		
Address:		
City/Town:	State:	Zip Code:
Home Phone:	Cell Phone:	Email:
Shipment Information		
Semen Should Arrive By:		
Number of Breeding Units to Release:		
Name of Person Semen is Going to:		
Veterinary Facility:		
Address:		
City/Town:	State:	Zip Code:
Office Phone:	Fax:	Email:
Bitch's Information		
Registered Name of Bitch:	Call Name:	
Breed:	Color:	
Registry and Number:		
Name of Bitch Owner:		
Address:		
City/Town:	State:	Zip Code:
Home Phone:	Cell Phone:	Email:
Method of Payment		
Card Type:	American Express <input type="checkbox"/> Discover <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/>	
Credit Card #:	Exp. Date:	Security Code:
Billing Zip Code:		
Name of Cardholder:		
I authorize ICSB-FL to charge any amount to my credit card provided herein. I agree that I will pay for this purchase in accordance with the issuing bank cardholder agreement. ICSB-FL has informed me that any charges will be billed to this card without informing me of amounts unless I ask directly for an estimate prior to my credit card being charged. I agree to any fees charged to my credit card.		
Signature of Cardholder:		Date:
I HAVE READ AND AGREE TO THE ABOVE TERMS AND CONDITIONS		
Printed Name of Semen Owner:		
Signature of Semen Owner:		Date:
Printed Name of Co-Owner(s):		
Signature of Co-Owner(s):		Date:



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PROCEDURES FOR UTILIZING YOUR STUD'S FROZEN SEMEN

When you wish to utilize frozen semen you have stored at ICSB-FL, the following steps should be followed in order to assure that shipping and artificial insemination are carried out efficiently.

1. **Check your account with ICSB-FL.** Your account should show a zero balance for frozen semen to be released for shipment. If you have any questions about your account, please call.
2. **Notify ICSB-FL early in the bitch's estrous cycle.** For example, on the first or second day that you notice a red vaginal discharge from the bitch. Send ICSB a completed "FROZEN SEMEN RELEASE" form.
3. **Allow 7 days for shipment** of the frozen semen. Usually, ICSB-FL can ship sooner than this; however, allow a safe margin of time for the shipment to be handled. It is very difficult, or may be impossible, to ship with just one or two days' notice before the bitch needs to be bred, or on a holiday weekend.
For shipments requested with less than 2 days' notice, an additional handling, "STAT" fee is charged. (Normally, a minimum 24-hour period is required to charge the shipping tank prior to retrieval of the frozen semen and transfer to the shipping tank.)
4. When you request ICSB-FL to ship your dog's frozen semen, please be sure you complete the **Frozen Canine Semen Release form**, listing the **name, address, and telephone number** of the shipment destination. Specify **how many breeding units of semen** you wish to be shipped. (One unit = One insemination). In most cases, 1 or 2 units are shipped. We accept **Visa, Master Card, American Express, or Discover** for the shipping charges, and it is usually the bitch owner who pays for the shipping and return of the tank. Please note we cannot release frozen semen without the completed FROZEN SEMEN RELEASE FORM on file. A COMPLETED FROZEN CANINE SEMEN RELEASE FORM IS NOT A TRANSFER OF OWNERSHIP.
5. **ICSB-FL will arrange for the shipping of your dog's frozen semen.** If ICSB-FL does not have a trained inseminator close to the bitch, then we can provide detailed written instructions and telephone assistance. We have many litters resulting from artificial insemination by untrained inseminators. The retrieval and thawing of the frozen semen involve just a few steps and is not difficult.
6. **Shipping charges, tank rental and return are ultimately the responsibility of the semen owner** The tank rental charge is \$200.00 for the first 7 days, beginning the day the tank leaves our facility. On the 8th day, a daily tank rental fee of \$15.00 is charged until the tank is returned, or until the replacement cost of the tank is reached. It is a **very good idea** for the semen owner to emphasize the rental fee to the recipient, and that is necessary for the bitch owner or veterinarian at the bitch's location to return the shipping tank as quickly as possible to avoid additional rental charges.
7. Sperm cells will eventually cease living, but no one knows or can predict when this will occur, and it can vary from dog to dog. ICSB-FL shall not be held liable for, and cannot guarantee conception from, frozen canine semen. Nor can ICSB-FL guarantee that the frozen sperm cells will be viable at the time of thawing for insemination. In the event of loss or damage of frozen semen due to natural causes due to weather, fire, storage/shipping tank failure, incorrect semen being inseminated or shipping tank accident/damage, ICSB-FL would not be held liable for the loss or the replacement value of the frozen semen or costs involved in freezing and storing the semen.
8. By my signature below, I authorize ICSB-FL to perform services for me. I agree to all statements made in the document preceding this signature and any statements made in the following document. I understand ICSB-FL does not guarantee fertility or successful fertilization. I also understand ICSB-FL is not responsible for services rendered by non-ICSB individuals. My payment for ICSB-FL services is due at the time of the service. Other charges may be applied to my credit card later. I understand that keeping my account current is my responsibility.
9. Prices subject to change without notice.

Sign and Date Below:

Signed: _____ Dated: _____