

**RECIPIENT HIRE REQUEST 2017**

Owner of Donor Mare : .....

Address: .....

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Tel No: ..... Mobile No: .....

Email: .....

Referring Veterinary Surgeon: .....

Address: .....

.....

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Tel No: ..... Mobile No: .....

Email: .....

Name of Donor Mare: .....

Breed: ..... Height: ..... Age: .....

Name of Stallion: .....

Natural Cover  or AI  : For AI, type of semen (frozen/chilled/fresh): .....

Number of recipients if using own: ..... Age(s): ..... Barren  Maiden

I have read and understood the 'Embryo Transfer Charges 2017' and 'General Terms & Conditions 2017', and agree to them. I agree to pay all accounts, in full *prior* to the removal of any mare(s).

Donor Mare Owner signature: ..... Date: .....

Please return by post, email or fax to Twemlows Stud Farm