

# Clark Rassi Quarter Horses, Inc.

1019 Springhill Road  
Aubrey, TX 76227  
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214.477.7401 Clark Rassi Cell  
801.631.6093 Chad Beus Cell  
940.440.2236 Ranch  
940.365.0318 Fax

This certifies \_\_\_\_\_ herein referred to as the mare Owner,  
has engaged one service to **Fearles** for the \_\_\_\_\_ breeding season at Clark Rassi Quarter Horses, Inc.

Mare Name: \_\_\_\_\_ Registration #: \_\_\_\_\_

Year Foaled: \_\_\_\_\_ Breed: \_\_\_\_\_

Sire: \_\_\_\_\_ Dam: \_\_\_\_\_

Clark Rassi Quarter Horse, Inc., agent for the above named stallion, will herein be referred to as the Breeder. This service is subject to the following:

1. The following fees are applicable:
  - a. An nonrefundable booking fee of \$ \_\_\_\_\_ is due at the signing and acceptance of this contract.
  - b. The balance of \$ \_\_\_\_\_ is payable prior to any shipment of semen, plus all unpaid expenses will be payable upon receipt of an invoice or prior to the mare leaving the farm, whichever is first.
  - c. Shipped Semen fees are as follows:
    - i. Overnight Federal Express \$ 300
    - ii. Counter to Counter Air \$ 300
    - iii. Mare owner is responsible for returning the container to the breeder at the Mare owner's expense via Federal Express.
  - d. Board at the farm is as follows:
    - i. Dry mares 15 /day
    - ii. Wet mares 20 /day
    - iii. Show barn 20 /day
2. A photocopy of the registration papers (both sides) shall be sent to the Breeder with this contract. A current Coggins and immunization records shall accompany the mare, otherwise the Breeder shall have the attending veterinarian perform all necessary examines to insure breeding soundness at Mare owners expense.
3. Live Foal Guarantee: Live foal means the foal shall stand and nurse. It is understood that if the mare proves barren, aborts or if the foal is stillborn, a return breeding will be guaranteed the following year at the Breeders facility, providing proper notification is given. Proper notification shall be defined as follows:  
Written certificate by a licensed Veterinarian within seven days that the mare produced a nonviable foal. Mare owner verifies that such abortion or death did not result from any act or omission of the Owner. Mare owner will be responsible for all additional shipping fees, mare care and \$500.00 chute fee for the return booking. If the mare does not produce a live foal the first breeding season bred, mare owner is entitled to a rebred the following year after the initial year the breeding fee was paid.
4. The breeding season in force for this contract shall begin February 1 and close June 15 of the year dated above on this contract.
5. Breeders Certificate will be issued to the Mare owner only after all expenses have been paid in full and upon notification of a live foal.
6. Should the above mare die, the mare owner shall be entitled to breed a substitute mare. If the above mentioned stallion should die or be unfit to bred, breeding fee less the nonrefundable booking fee shall be refunded.
7. Waiver of Liability: It is understood that the breeding farm, its owners, employees, and quest shall not be liable for any injury, escape, disability or death of any horse on its premises. The above mentioned mare owner, whose horse is under the care of the Breeder, will not be liable or responsible for any damage, injury or death to the breeding farms stallion, employees, or other animals under the care of the breeder.
8. This contract is not valid unless completed in full. This contract is non-transferable and non-assignable. When signed by both parties, the contract will be binding and subject to the above conditions. The contract is entered in the State of Texas under the laws of Texas.
9. Semen collections are performer on an every other day schedule. The breeder must be notified no later than 7:00 PM CST on the day prior to semen collection to insure availability. Mares shipped to the Breeder will be given preference if availability is an issue.

_____ Mare Owner Signature	_____ Date	_____ Clark Rassi Quarter Horses, Inc.	_____ Date
Mare Owner Name: _____			
Address: _____			
City: _____	State: _____	Zip Code: _____	Phone Number: _____