Grahams Road
RD 4, Ashburton
New Zealand
caithness@ihug.co.nz
Ph: +64 3 302 6870
Fax: +64 3 302 6879
Mobile: 025 935-180

TERMS AND CONDITIONS OF SERVICE

Caithness Stud offers to provide a service from **MAESTRO** for the mare

……………………… nominated by myself, ………………………………….., for the 2014 - 2015 season.

This is accepted on the following terms:

1. I will pay a stud fee of **$1800 inc gst** (Live Foal Guarantee); 50% of this amount is due at the 16- day positive scan, with the remainder payable at 42 days.
2. A deposit of $200 must accompany the booking form. This will be deducted from the Service Fee. In the case of a mare not conceiving this deposit will not be refunded but will be deemed to be a handling and usage charge.
3. I agree to pay interest at 20% per calendar month or part thereof on all sums outstanding by me 14 days after the date of invoice. . I also understand I am liable for any costs associated with debt collection and legal expenses over any unpaid invoices in relation to any costs in relation to this service
4. **LIVE FOAL GUARANTEE**: A free service is given for mares served who abort or whose foal is delivered dead or dies within 24 hours of birth. This must be certified by a veterinary Surgeon. No refunds are given. Return handling fee of $200.
    a. The right to receive a refund is lost if I sell the mare
    b. The right to receive a refund is lost should no live foal eventuate as a result of the death of my mare
5. I am responsible for and will pay all veterinary fees and charges as and when incurred by my mare and foal.
6. I acknowledge that you have the right to refuse to provide service to any mare which is diseased or infected
7. **Gelding Policy** (below) is required with all colts born by MAESTRO. Veterinary certificate to confirm sex within 4 weeks.**
8. The booking of a mare will be deemed to indicate acceptance of these terms and conditions.
9. I agree that this nomination is not transferable.
10. **All mares must be checked by veterinarian for fertility and suitability to conceive with frozen semen ** Due to limited semen available for Maestro Caithness Stud reserves the right to accept or decline application for service**

Signed by Mare Owner..Date...................

Signed ………………...Date...................

on behalf of Caithness Stud

…………………………………………………………………………………………………..

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COMMITMENT TO WARMBLOOD GELDING POLICY

In accordance with the Caithness Stud Terms and Conditions of Service, I hereby agree to geld any colt progeny of MAESTRO.

The gelding of a colt foal is to be completed and certified by a Veterinary Surgeon when the foal is of suitable age for gelding and no later than 18 months old. I understand that this colt may not be bred to any mares and on signing this document that failure to comply with this gelding policy may result in a fine of $50,000. The colt must still be gelded.

I have read and understood the conditions of the Caithness Stud Terms and Conditions of Service and the Warmblood Gelding Policy.

If foal is sold in utero or after birth, this policy is your responsibility unless new owner signs it and it is forwarded to Caithness Stud.

Signed ………………………………………… Date ……………………

Full Name …………………………………………………………………

Dated ………………………………………………………………

Signed ………………………………………… Date ……………………

 (on behalf of Caithness Stud)

TERMS AND CONDITIONS OF AI SERVICE

Caithness Stud offers to provide an artificial service (AI) from **MAESTRO** for the mare

……………………………………………………………………………………………

Nominated by myself, …………………………….……………., for the 2014-2015 season.

This is accepted on the following terms:

1. I will pay a stud fee of **$1800 inc gst** prior to semen being sent. Booking fee included in stud fee.
2. A deposit of $200 must accompany the booking form. This will be deducted from the Service Fee. In the case of a mare not conceiving this deposit will not be refunded but will be deemed to be a handling and usage charge
3. If mare does not conceive after 3 collections with a veterinary certificate to confirm mare not in foal. There will be a refund of $700.
4. I (owner) am responsible for and will pay vet collection and courier costs.
5. It must be certified by a veterinary surgeon that ……………..…… was covered on ……………….. only. This contract is made to ……………………... who is the owner/leasee of ……….…………....
6. LIVE FOAL GUARANTEE: A return service is given for mares who abort or whose foal is delivered dead or dies within 24 hours of birth. This must be certified by a veterinary Surgeon. No refunds are given. Return handling fee of $150.
7. The right to receive a refund is lost if I sell the mare
8. The right to receive a refund is lost should no live foal eventuate as a result of the death of my mare.

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9. Gelding Policy is required with all colts born by MAESTRO. Veterinary certificate to confirm sex within 4 weeks. If no certificate is produced we assume it is a colt. Therefore gelding policy (above) will apply.
10. The booking of a mare by AI will be deemed to indicate acceptance of these terms and conditions.
11. I agree that this nomination is not transferable.
12. **All mares must be checked by veterinarian for fertility and suitability to conceive with frozen semen**

** Due to limited semen available for Maestro Caithness Stud reserves the right to accept or decline application for service

INFORMATION FOR STUD

Name of mare ……………………………… Colour ………………………………………….

Paddock name ……………………….………… Breed …………………………………………….

Sire …………………………………………….. Dam ……………………………………………..

Age ……………………………………………. Height ……………………………………………….

Brands …………………………………………….

Registrations …………………………………………………………………………………………….

………

……...

Performance history ……………………………………………….………………………………………..

………

……...

BREEDING HISTORY

Mare status Dry Maiden Foal at foot In foal - due: …………………………….

If in foal - sire of foal: …………………………… Date of last service: ………………………

How many foals has she had? ………………………

Year of last foal: ………………………

Has mare had previous breeding difficulties? Please specify: ………………………………….

………

…………..………………………………………………………………………………………...

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MEDICAL HISTORY

Date last wormed ……………………… Tetanus immunised? YES/NO

Name of owner(s) : …………………………………………………………………….

Address for accounts/correspondence: …………………………..……………………………….

…………………………………………………………………………………………………..

Telephone number: ………………………… Fax ………………………………….………

Signature ……………………………………. Date: ……………………………………………