

## FROZEN CANINE SEMEN RELEASE FORM

INTERNATIONAL CANINE SEMEN BANK – WISCONSIN/ILLINOIS

This form must be completed by the semen owner and submitted to ICSB-Wisconsin **<u>BEFORE</u>** frozen semen can be released. <u>Please submit this form to arrive at least 3 days before requested shipping date.</u> If notice is less than three days, a stat fee will apply.

Registered Name of Dog		Call Name		Breed	Registry and Num	
ICSB-WI File	Number					
NUMBER		G UNITS (1 PER B	REEDING	) TO RELEAS	E	
		hould be shipped		=		
Ship to:	Name					
	Veterinary Facility			· · · · · · · · · · · · · · · · · · ·		
	Address					
	Zip/country cod	e				
For use by:	Bitch Owner Phone #					
	Address					
	Zip/country cod	e				
Registered Name of bitch to be bred Registry & Number						
Charges are to be billed to (Visa/Mastercard) num					Exp	
Your credit card will be charged prior to shipm Name on credit card			$C \setminus A \setminus A$	Zin Code		
			<u> </u>		·	
If you'd like to	o put insurance o	ver the shipping tank re n your shipment, please y the shipping company	e contact Fed	Ex or UPS.	-	
Signature of semen owner				Date		
Printed name of semen owner				Phone		
Address						
Str	eet		City	State	Zip	_
event that the	bitch owner fails to	y the bitch owner; howeve reimburse ICSB-Wiscons <i>left Veterinary Village</i>	sin/Illinois for th	ne shipping or retur	n of the tank.	
		as reached the recipie				

the eighth day, a daily rental will be charged until the shipping tank is returned or the replacement cost is reached.

Semen released by \_\_\_\_\_(Tech) Verified by \_\_\_\_\_(Doctor)

place it in their own storage tank. ICSB policy is to provide the use of the shipping tank for 7 days. On