



Dukes Equine Vets

Dykehead Farm
Aboyne
Aberdeenshire
AB34 5JH

0345 095 9995

Booking and consent form 2025
MARES FOR INSEMINATION WITH FRESH, CHILLED OR FROZEN

Name of Mare:.....

Fresh, Chilled or Frozen
semen:.....

Stallion:.....

Contact Details of stallion owner: -

Telephone number:.....

Mobile No:.....

Name & Address of Owner:

Invoicing Address if Different :

Telephone number:.....

Telephone No:.....

Mobile:.....

I wish to book my mare in to Dykehead Farm Stud for the 2025 season to be artificially inseminated with semen from the stallion named above. I confirm I have read and understand exactly what procedures are and are not covered by the fixed fee scheme. I acknowledge that I will pay all other fees for livery and care of the horse whilst at Dykehead Farm Stud, and other costs relating to the purchase, transport and storage of semen. I am aware that all outstanding fees must be paid before the mare leaves the stud.

I acknowledge that breeding horses involves an element of risk for the mare and I am prepared to take that risk. I understand that it is my responsibility to ensure the mare is adequately insured to cover all risks whilst she is at Dykehead. Should the mare need referral to a specialist centre for any reason I do/do not authorise this in an emergency if I cannot be contacted, and I will pay all fees related to this.

I confirm that I wish Dukes Equine Vets Limited to have responsibility for the veterinary care of my horse during the period that the horse is at Dykehead Farm, and that should the horse need any treatment for any other illness, injury or routine healthcare during her stay at Dykehead Farm I confirm that I authorise Dukes Equine Vets Limited to carry this out as appropriate.

Whilst every care will be taken with semen stored by Dukes Equine Vets Limited, I understand that all semen stored by Dukes Equine Vets Limited is at my own risk. I must take out my own insurance for the semen during storage if I require it.

I do/do not\* wish to use the Limited fixed fee scheme paying a per cycle inclusive fee, livery and a confirmed pregnancy fee if successful.

Or \*I wish to use the no pregnancy no fee scheme for mares 4 – 14 years of age and will pay the full fee when booking the mare in

Or \*I wish to use the comprehensive fixed fee scheme for mares 15 – 19 years of age and will pay the full fee when booking the mare in

Or \* I will pay for each procedure carried out during the AI process including all examinations, drugs and treatment plus livery as applicable.

\*Delete as appropriate

Signed.....Date.....

**LIVERY INFORMATION: (for yard use)**

**DATE ARRIVED:**

<b>NAME:</b>	<b>COLOUR:</b>	<b>AGE:</b>
<b>OWNER:</b>	<b>PHONE:</b>	<b>HORSE PASSPORT NO:</b>
<b>DATE LAST WORMED:</b>	<b>DATE LAST SEEN BY FARRIER:</b>	<b>DISTINGUISHING MARKS / INFO:</b>
<b>PRODUCT:</b>	<b>DATE LAST VACCINATED:</b>	

**DETAILS OF FOAL AT FOOT (if applicable)**

<b>NAME:</b>	<b>DATE FOALED:</b>	<b>DISTINGUISHING MARKS / INFO:</b>
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