



SOMERSET FARMS QUEENSLAND
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STALLION SERVICE AGREEMENT FORM 2022/23

OWNER / LESSEE DETAILS (person liable for account)

| | | |
|--|-------------|------------|
| Surname: | First Name: | |
| Residential Address: | | |
| Suburb: | State: | Post Code: |
| Postal Address: <i>(if different to above)</i> | | |
| Suburb: | State: | Post Code: |
| Email: | | |
| Home: | Work: | Mobile: |

SERVICE PARTICULARS

| | |
|--|-----------------|
| Mare: | Freeze Brand: |
| Stallion Requested: | Service Fee: \$ |
| Bred Last Season: Yes / No In Foal? <input type="checkbox"/> Slipped <input type="checkbox"/> Empty <input type="checkbox"/> Last Service Date: / / | |
| Location of Mare: <i>(Insemination Site - Vet/Stud)</i> | |
| Address: | |
| Phone: | Email: |

Please find attached the Terms & Conditions which apply to this agreement. In signing this agreement I certify that I am the person responsible for all payments of all accounts including the Service Fee. Please note any discounts given will be revoked if payment terms are not met. Semen transport charges will be invoiced separately and are payable on 7 days.

Print Name: _____ **Signature:** _____

(Person or authorised agent responsible for Service Fee/charges)

Date: / / /

Approved by Somerset Farms Queensland : _____ **Date:** / / /

This form must be signed before semen is sent. Please download the semen order form once completed and email or fax to Somerset Farms Queensland, see details above.