



WILLINGA PARK

EQUINE REPRODUCTION ADMISSION AND CONSENT FORM

Horse Name:.....Age:.....

Sex:..... Breed:..... Microchip#:.....

Brands: NS..... OS:..... Markings and whorls.....

Owner/Agent:..... Mobile:.....

Address:.....

Postal

Address:.....

Email Address.....

Date of last tetanus/strangles vaccination:..... (if unknown or over 12 months, horse will be vaccinated on arrival)

Is Hendra Vaccination Current? Yes No

Date of last worming:.....(if unknown or over 4 weeks horse will be wormed on arrival)

Is Horse Insured? Yes No Farrier attendance required: Yes No Dental required: Yes No

MARE HISTORY

Previous pregnancies:..... Date of Last Foaling:.....

Complications:.....

I..... (**Owner/Agent**) authorize Willinga Park to perform procedures and treatment associated with (tick appropriate procedure).

Artificial Insemination: Fresh Semen	<input type="checkbox"/>	Embryo Transfer: Fresh Semen	<input type="checkbox"/>
Chilled Semen	<input type="checkbox"/>	Chilled Semen	<input type="checkbox"/>
Frozen Semen	<input type="checkbox"/>	Frozen Semen	<input type="checkbox"/>

STALLION DETAILS

Stallion's Name:.....

Semen Supplier:..... Ph:.....

If an agent of the owner, I confirm that I have the express authority of the owner to authorise the above Procedure. Positive results cannot be guaranteed or warranted. Willinga Park can accept no responsibility for the quality of the semen, or its disease or genetic status. Willinga Park can accept no responsibility for any costs relating to collection, processing, transport or storage of semen. The mare will be placed in a crush and be examined internally on multiple occasions, causing a small but finite risk of injury, Infertility or death. Reproductive hormones, sedatives and relaxants will be used at our discretion. Agistment is charged per day along with other fees as discussed. I have had the opportunity to discuss the Procedure proposed I acknowledge that I have read the above and understood the nature and consequences of the Procedure. I understand that the Procedure may involve some risk and I give my consent for the Procedure to be performed. I/We also acknowledge that complications may develop because of the procedure(s), which may incur additional fees. As owner I agree to pay all charges incurred on discharge of my animal. Or, in case of dispute, I as agent agree to pay these costs. I/ We acknowledge that post operative care may be required, and will be undertaken as deemed necessary by the attending Veterinary Surgeon.

I undertake to pay all costs incurred in undertaking this Procedure including those associated with agistment. I also confirm that I have been provided with an estimate of the veterinary and associated fees relevant to the proposed Procedure to which I am consenting.

1. TERM AND CHARGES

- 1.1 The contract will be valid per reproductive cycle (as deemed by the vet surgeon).
- 1.2 The contract is for artificial insemination of chilled, fresh and frozen semen only and/or embryo transfer.
- 1.3 The fee for the services for the Term of this Mare Reproductive contract as discussed
- 1.4 The *mare owner/s* agree to pay all accounts within 20 days of receiving end of the month invoicing. Interest of 1.5% per month and a late fee of \$15 will be applied to all late payments.
- 1.5 We reserve the right to refuse 'contract' status to any mare that we deem as being a remarkably poor breeding prospect.

2. SERVICES TO BE SUPPLIED BY WILLINGA PARK INCLUDED IN THIS FEE:

- 2.1 One artificial insemination
- 2.2 Ultrasound examinations
- 2.3 Rectal and vaginal examinations.
- 2.4 Routine hormones and reproductive drugs (Prostaglandins, Chorulon'Deslorelin and Oxytocin)

3. SERVICES NOT INCLUDED IN THIS FEE:

- 3.1 Laboratory services
- 3.2 Altenogest; Regumate; Injectable Altrenogest
- 3.3 Collection of semen from stallion
- 3.4 Non reproductive drugs (ie antibiotics and anti-inflammatory)
- 3.5 Post foaling uterine treatments
- 3.6 Ultrasound examination for foetal sexing
- 3.7 Ultrasound examination for placental assessment
- 3.8 Vaccinations and Drenching
- 3.9 Delivery of foals and associated problems
- 3.10 Removal of retained foetal membranes
- 3.11 Insurance exams, certificates and stud book identification
- 3.12 Treatment for illness or injury
- 3.13 Radiology and other Diagnostic Procedures
- 3.14 Sedation (for any reason)
- 3.15 Foal treatments (ie IgG Tests; Plasma transfusions)

4. HOLD BLAMELESS:

The *mare owner* hereby acknowledges that:

- 4.1 The breeding and rearing of any mare/s is a high risk activity and *the mare owner* has the option to insure against such losses.
- 4.2 Follicle and pregnancy testing involves per-rectal examinations, and these procedures carry a small risk of serious injury including death to the mare
- 4.3 A small percentage of pregnancies result in twins and these are routinely managed by early detection and reduction to a single pregnancy. This procedure can result in the loss of both embryos.
- 4.4 Willinga Park is hereby authorized by the *mare owner/agent* to undertake reduction to a single pregnancy.
- 4.5 The *mare owner/agent* accepts the risks in the procedures and work included in this contract.

5. THE MARE OWNER:

The *mare owner* hereby declares:

- 5.1 That the *mare owner* is the registered Owner of the *mare* with full power and authority to enter into each of the provisions of this contract.
- 5.2 The *mare owner* has disclosed ALL relevant veterinary and breeding history of the *mare*, and that such information is true and correct.
- 5.3 The *mare owner/agent* confirms that the '*mare*' is of good general health (disease free) and is in healthy breeding condition.

6. PAYMENT OF COSTS:

I undertake to pay all costs incurred in undertaking this procedure including those associated with agistment. I have been provided with an estimate of the veterinary and associated fees relevant to the proposed treatment to which I am consenting. I understand that the veterinary surgeon will attempt to immediately inform me if the proposed fees are likely to exceed that estimate. I agree to indemnify the attending veterinarian, his servants and agents for any loss or liability that they may incur as a result of any inaccuracy or complications, whether intended or otherwise, arising from the information provided by me in this Consent Form. As owner I agree to pay all charges incurred on discharge of the animal, or in case of dispute I as agent agree to pay these costs.

I agree that all cost incurred while my horse is at Willinga Park are payable upon discharge and that failure to pay the costs in full can result in Willinga Park holding my horse at EXTRA COST until such time as all fees are paid. The onus is on me to remain informed of the current balance of my account.

PAYMENT DETAILS

Credit Card: Name on Card.....Card Number _ _ _ _ / _ _ _ _ / _ _ _ _ / _ _ _ _

Expiry Date ____ / ____ Visa Master Card American Express

Cardholder Signature_____

Signed by the mare Owner:.....Date:.....

Signature of Witness.....Name of Witness.....

Signed by..... On behalf of Willinga Park

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Capital Property Corporation Pty Limited.