



WILLINGA PARK

Please email this form before 5PM THE DAY BEFORE SHIPMENT is required

This form is to be used for semen departing WP to client's vet as listed below

OUTGOING CHILLED SEMEN ORDER FORM 2021/22

Stallion Required:.....

Date Ordered:..... Date Required:.....

Person Ordering Semen:.....

Mare name:.....

Owner name:.....

Address (Please Print):.....

Town:..... State:..... Mobile.....

e-mail:.....

If you require a quote you must email S.Cookson@willingapark.com.au for this before faxing/emailing this order form. Please allow 24 hours for a quote to be given.

Send to

Vet Name:.....Clinic:.....

Email:.....

Delivery Address:.....

Town:.....State:.....P/C:.....

Contact details:.....Phone:.....

TOLL..... QANTAS..... OTHER.....

Please note: WP will not be held responsible for any semen once it has departed. All related costs are the responsibility of the mare owner.

PAYMENT in full is required before semen departs WP

CREDIT CARD NUMBER : _____

EXPIRY DATE : _____ CCV _____ Card Type: _____

Name on card : _____

I have read all of the above details and agree to the terms and conditions listed above. Credit Charges apply.

SIGNATURE : _____

Confirmation of semen dispatched will be forwarded to your email