



VIRGINIA-MARYLAND COLLEGE
OF VETERINARY MEDICINE

Veterinary Teaching Hospital
Theriogenology Services Laboratory
245 Duck Pond Drive, Blacksburg, VA 24061
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vth.vetmed.vt.edu

Frozen Semen Shipping or Destruction form

Owner Name: _____

Owner Address: _____

I CERTIFY that I am the *legal owner* / *co-owner* (check the corresponding box) of frozen semen stored at the Theriogenology Services Laboratory from _____, (Breed)

_____, _____ AND
(Registration Number) (Registration Number)

I AUTHORIZE *shipment for insemination*, *transfer of ownership*, *transfer of storage location*, or *destruction and disposal* (check the corresponding box) of _____ frozen semen breeding doses to the following: (Number of Doses)

Transferee Name: _____

Veterinary Clinic/Veterinarian: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Country: _____ Phone No.: _____

SHIPPER AGREEMENT:

Credit Card information will need to be given to the Business Office for shipment of frozen or chilled semen. There is a rental fee of **\$100 (Dry Dewar for frozen semen)** or **\$45 (Equitainer for shipped, chilled semen)** rental fee, depending on the type of shipper leased. The below signed is responsible for the market value of the shipping container if the container is not returned or it is returned damaged. This fee includes appropriate filling of the tank with liquid nitrogen, or preparation of chilled semen and use for three business days. If the shipping container is not received by the Theriogenology Services Laboratory within three business days after delivery to the receiving facility, a **\$55/day (Dewar) or \$15/day (Equitainer)** late charge will accrue until day seven at which time your credit card will be charged the cost of the shipper. **Please ensure that personnel at**



the receiving facility are aware that late charges will be assessed to your credit card if the dry shipper is not returned in a timely manner. Fees for shipping semen and return of the shipper to our facilities will be charged directly through the VTH **in addition** to the rental fee.

I AUTHORIZE THE ABOVE TRANSACTION AND CERTIFY THAT I AM THE LEGAL OWNER OF THE SEMEN FROM THE ANIMAL LISTED ABOVE.

OWNER SIGNATURE: _____ DATE: _____

