

## Richard L. Beck, D.V.M

39185 Diamond Valley Rd.
Hemet, CA92543
Office 951-929-4533 Fax 951-929-2077
Email hosdok2@aol.com
www.lnFoal-inc.com

## Intracytoplasmic Sperm Injection (ICSI) 2019 Contract In Foal, Inc. - GUARANTEED 45 DAY PREGNANT RECIPIENT MARE - TOTAL COST \$10,000 OR NOTHING

(\$10,000 does not include recipient mare deposit or additional services after 45 days)

| This service agreement between In Fo<br>begin on,2019, a<br>Foal, Inc. will be referred to as IF and<br>mare/embryo owner for the purpose o | nd terminate at the | will e end of that calendar year. In will be referred to a | 5 |
|---|---------------------|--|---|
| Mare<br>nsurance Agent or Contact #   | Breed<br>           | Age  |   |
| Stallion(s) 1<br>2<br>3   |                     | regnancies?<br>regnancies?<br>regnancies?                  |   |

Mare owner will be responsible for all Stallion fees, airport and courier fees for semen if necessary. All stallions must have a current EVA negative status (equine viral arteritis).

Mare owner is responsible for board:

- 1. \$18.00/day for the donor mare includes alfalfa hay, 12x16 wire pen and shavings.
- 2. Recipient mare board after 45 days is \$18.00 per day, progesterone will be an additional \$25.00 per week.
- 3. Other medical expenses, such as special diet, blanketing, etc. will be charged extra.

## Fee Schedule:

| Service:                  | Fee:                     | Reference:                     |
|---------------------------|--------------------------|--------------------------------|
| Aspiration                | \$0                      | Aspirating at In Foal, Inc. in |
|                           |                          | Hemet, CA.                     |
| Injection                 | \$0                      |                                |
| Embryo Fee                | \$0                      | Per embryo                     |
| Transfer Fee              | \$0                      | Per embryo                     |
| 15 day positive pregnancy | \$5000                   | Per pregnancy                  |
| 45 day positive pregnancy | \$5000                   | Per pregnancy*                 |
|                           | REFUNDED IF PREGNANCY IS | *Guaranteed 45 day positive    |
|                           | LOST BEFORE 45 DAYS      | pregnancy or NO charge.        |
| Recipient Mare Deposit    | \$1500                   | Refunded when recipient        |
|                           |                          | mare is returned.*             |
| Altrenogest               | \$0                      | Provided by In Foal Inc.       |
| (Progesterone)            |                          |                                |

<sup>\*</sup>Please see below for recipient mare refund details

The fee of \$10,000 for each resulting pregnancy will be due at the 45 day pregnancy check. If the pregnancy is lost before the 45 day pregnancy check, there will be no charge. A \*\*\$1,500 recipient mare deposit will also be due on day 45 and will be refunded upon the return of the recipient mare. No Exceptions. \*\*Beginning January 2019, the recipient mare deposit fee has been set at \$1,500.00 If you opt to not return the recipient mare or she is unreturned for any reason such as in the event of death or sale, client will forfeit the deposit and an additional \$1500.00 payment will be due. Should you wish to return the recipient mare to In Foal after weaning, we will gladly return the recipient mare deposit as long as the recipient mare is healthy and reproductively sound.

(In Foal reserves the right to withhold a percentage of recipient mare deposit should the recipient mare be returned in unsuitable condition pending veterinary inspection)

A credit card authorization form will be on file with our office, which will allow IF to charge these payments to the mare owners credit card. All overdue accounts will be charged 1  $\frac{1}{2}$  % interest per month. A late fee of \$250.00 per month will be assessed on all accounts delinquent over 60 days.

Until there is a pregnancy, only donor mare board will be charged. IF has the option to terminate Plan A after 4 unsuccessful cycles, owner has the option to continue with the Texas Pricing Plan.

\*Recipient mare <u>must</u> be kept on 5ml, 60mg Altrenogest (Progesterone)injections every seven days through 120 days pregnant. Injections will be provided by In Foal, Inc. at no cost under this contract. **NO EXCEPTIONS.** 

Mortality insurance on the pregnancy is strongly recommended. This is available from In Foal, Inc. for \$1500.00 If the recipient mare loses the pregnancy, IF will repeat the ICSI procedure at no cost the following year. This insurance is non-transferable (Must be used for the same donor mare whose embryo it originally insured) and only applies to the year following the loss.

We require a minimum 24 hour notice for pick up and drop off of horses. Please call or email our office with hauler information so that we can stay in contact the day of anticipated arrival/pick up.

Drop off/Pick up times for horses are as follows:

~Monday- Friday: 8am-6pm ~Saturday-Sunday: 8am to 4pm

If pick up or drop off times will differ, please contact the In Foal Staff as soon as possible for notification and confirmation.

Mare/Embryo owner hereby releases and shall indemnify and hold IF harmless from any claim for any disease, injury or death to the owner, owners family, employees, property, donor mare, pregnant recipient mare and/or in utero fetus arising from any undertaking by IF under the terms of this provision.

| Mare/Embryo Owner (print)     | Date                       |    |     |  |
|-------------------------------|----------------------------|----|-----|--|
| Mare/Embryo Owner (signature) |                            |    |     |  |
| Address                       | City                       | St | Zip |  |
| Phone                         | Fax                        |    |     |  |
| Email                         | CreditCard                 |    |     |  |
|                               | CreditCard expiration date |    |     |  |
| IF                            | Date                       |    |     |  |