



INTERNATIONAL ANIMAL SEMEN BANK, INC., dba INTERNATIONAL CANINE SEMEN BANK and ICSB
 430 W Arlington St., Gladstone, OR 97027 | P.O. Box 123, Gladstone, OR 97027
 Phone: (503) 663-7031 | Fax: (503) 676-8025 | Email: contact@icsb.com | Website: www.ICSB.com

Frozen Semen Release Authorization Form for Artificial Insemination (AI)

This form must be completed by the semen owner, bitch owner, and cardholder and submitted to ICSB before frozen semen can be released for AI. **This form is not a transfer of ownership. Please submit this form to arrive at ICSB at least 3 business days before the expected AI.** ICSB will confirm receipt of the form by email; if you have not received confirmation, please resend the form. If notice is less than two days, you will be subject to stat fees, if cost is a concern, please inquire for an estimate of these fees. **Any amendments to this form will require a new form to be filled out by the semen owner.** THIS FORM WILL EXPIRE 90 DAYS FROM THE DATE LISTED BY THE SIGNATURE OF THE SEMEN OWNER ON THE BACK OF THIS FORM. IF THE DATE IS LEFT BLANK BELOW, ICSB WILL FILL IN THE DATE ON WHICH THIS FORM WAS RECEIVED. **THIS IS A 2-PAGE FORM; REQUIRES ALL SIGNATURES PRIOR TO RELEASE.**

Registered Name of Stud Dog	Breed	Registry and Number
Semen Owner: _____		
Phone: _____	E-mail: _____	
Address: _____	City: _____	State: _____ Zip Code: _____

Please specify the NUMBER OF VIALS or STRAWS TO RELEASE: _____

ICSB recommends ONE vial per insemination. ICSB recommends two AI's, therefore, you will need to release TWO vials.

Reason for service(s): Professional/Commercial Breeder Personal/Family

Insemination Facility: _____ ICSB 430 W. Arlington St. Gladstone, OR 97027
 _____ 503-663-7031 contact@icsb.com

For use by: Bitch Owner: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone Number: _____
 E-mail: _____

Registered Name of Bitch to be Bred: _____ Reg. #: _____

Expected Date Bitch to Come into Season: _____

Please note, ICSB makes no promises, representations, guarantees, or warranties, expressed or implied, that conception will occur, or that the frozen sperm cells are viable or will remain viable at the time of, or after, the cells are frozen. In the event of any loss or damage of semen due to circumstances outside of the control of ICSB, including but not limited to fire, earthquakes, flooding, weather events, power outages, theft, vandalism, defective storage tanks or local work tanks (dry shippers), ICSB shall not be held liable for the loss, damage, or replacement value of the semen. Service Fees can be paid by another person; however, the semen owner is ultimately responsible for all costs. Any chargebacks by the payment method provided shall be reimbursed to ICSB by the semen owner. The semen owner is responsible for informing the payer of the fees involved in preparing frozen semen from their account at ICSB. Please complete and return this form to Fax: (503) 676-8025 OR E-mail: contact@icsb.com. Postal service is not recommended and may result in delays. You, as the semen owner, release the frozen semen to use it to perform an AI on the bitch listed above in the near future with ICSB, and You authorize ICSB to do these at your own risk. Prices are subject to change without notice.

FOR LAB USE ONLY

At Time of Insemination:

Date: _____ Expected Motility: _____ % Observed Motility: _____ % Speed of Progression 0 1 2 3 4 5

Date: _____ Expected Motility: _____ % Observed Motility: _____ % Speed of Progression 0 1 2 3 4 5

Date: _____ Expected Motility: _____ % Observed Motility: _____ % Speed of Progression 0 1 2 3 4 5

TERMS AND CONDITIONS

1. Check your account with ICSB. Your account must be paid in full in order for frozen semen to be released for AI. If you have any questions about your account, please call (503) 663-7031 or email contact@icsb.com.
2. Notify ICSB early in the bitch's estrous cycle. For example, on the first day that you notice a red vaginal discharge from the bitch, send ICSB a completed Frozen Semen Release Authorization Form For AI.
3. Allow 3 to 4 days for ICSB to prepare the frozen semen. Usually, ICSB can prepare the frozen semen sooner than this, however, allow a safe margin of time for the release to be handled. It is very difficult, or may be impossible, to release semen with just one day's notice before a bitch needs to be bred, or on a holiday or weekend. For releases requested with less than 2 days' notice, or ASAP, an additional handling Stat Fee will be charged.
4. When you request ICSB to release your dog's frozen semen, please be sure you complete this form, listing the name, address, and telephone number of the Bitch Owner. Specify how many vials or straws of semen to release for the AI. We accept Visa, MasterCard, Discover, American Express or cash for the charge of semen preparation for AI. Please note that ICSB cannot release frozen semen without the completed Frozen Semen Release Authorization Form for AI. **Please note, a completed Frozen Semen Release Authorization Form for AI is not a transfer of ownership.**
5. Service Fees are ultimately the responsibility of the semen owner. All prices are subject to change without notice.
6. In the event of any loss or damage of semen due to circumstances outside of the control of ICSB, including but not limited to fire, earthquakes, flooding, weather events, power outages, theft, vandalism, defective storage tanks, and defective local work tanks (dry shippers), ICSB may not and shall not be held liable for the loss, damage, or replacement value of the semen.
7. Canine semen is a living organism that, even when frozen, deteriorates over time. ICSB makes no promises, guarantees, warranties, or representations, express or implied, that canine semen stored at ICSB will stay the same over time, that canine semen will be viable, that canine semen will be of any particular quality or motility, or that the use of any canine semen will result in conception. Sperm cells will eventually cease living, but no one knows or can predict when this will occur, and it can vary from dog to dog. ICSB may not and shall not be held liable for outcomes from the use of semen and cannot guarantee conception from frozen canine semen. Nor can ICSB guarantee that the frozen sperm cells will be viable at the time of thawing for insemination. ICSB may not and shall not be held liable or responsible for any outcomes related to use of the frozen semen from the above dog.
8. You understand and agree that ICSB is not responsible for the condition of the semen and ICSB may not and shall not be held liable or responsible for any outcomes related to use of the frozen semen from the above dog and you will read all forms and instructions provided by ICSB.
9. **ICSB's liability, as well as that of any of its owners, employees, or agents, may not and shall not exceed the total compensation received by ICSB. This limitation of liability applies to any and all claims, losses, expenses, injuries, or damages arising out of or in any way related to the performance of this agreement by reason of any act or omission, including breach of contract, negligence, errors, omissions, strict liability, breach of warranty, or any reason whatsoever, not amounting to a willful, wanton, or intentional wrong. This limitation of liability includes, but is not limited to claims for lost profits, loss of use, costs of replacement, special damages, and/or indirect or consequential damages whatsoever, regardless of whether or not it was caused in whole or in part by ICSB or its owners, employees, or agents.**
10. **In the event that any dispute arises between you and ICSB, you agree that the dispute shall be governed by laws of the State of Oregon, USA, without regard to any conflict of laws principles, and you agree that any and all disputes and actions shall be commenced only in the Circuit Court of the State of Oregon for Multnomah County, Oregon. You agree to submit to the exclusive jurisdiction and venue of the Circuit Court of the State of Oregon for Multnomah County, Oregon. You agree that the statute of limitations for any claim related to or arising out of this agreement is one year, and any claim commenced after one year, without exception, is time-barred. This applies to any claims brought by you and ICSB. You agree that for this statute of limitations, there is no discovery rule, and this one-year statute of limitations supersedes any statute of limitation or statute of ultimate repose that otherwise may have applied.**

By your signature below, you certify that the information you provide in this document is true and correct. You authorize ICSB to perform services for you at your own risk. You agree to all the terms and conditions in this agreement preceding your signature below. You agree for ICSB to charge the fee for services to your provided payment method below. You understand that other charges may be applied at a later date, if additional services are necessary and ICSB may or may not notify you of these additional charges prior to charging you. You further state that ICSB has offered to provide an estimate of these charges to you and you agree to any fees ICSB charges without informing you. If you initiate a chargeback, or a check is bounced, you understand you will be charged additional fees. If ICSB has to prove in any way that you authorized the use of your provided payment method below, you will incur additional fees from ICSB any time they are required to prepare a response to your chargeback. You also agree that any person you allow to access your frozen semen at ICSB, or any person that pays fees billed to your account at ICSB will be guaranteed by you. Any person you ask ICSB to bill on your behalf will be informed by you of fees or charges made by ICSB. If the person reverses any charge at ICSB, you will be held liable for reimbursement to ICSB immediately. It is your responsibility to ensure ICSB is paid for all services performed by or charged through ICSB to your account at ICSB.

SIGNATURE of Semen Owner: _____ Date: _____

SIGNATURE of Bitch Owner: _____ Date: _____

SIGNATURE of Cardholder: _____ Date: _____

Cardholder Name: _____ CCV: _____ Zip Code: _____

Credit Card Number: _____ Expiration Date: _____