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FROZEN SEMEN CREDIT CARD AUTHORIZATION FORM for International Shipments

I, the undersigned, understand that Colorado Veterinary Specialists will provide an estimate for the processing and shipping of frozen semen, which I will sign and return to Colorado Veterinary Specialists. By signing the estimate, I authorize Colorado Veterinary Specialists charge my credit card for the charges as provided in the estimate. The estimate will include tank rental for 2 weeks. I agree to pay \$10.00 per day for every day the tank is not returned after the initial two weeks. In addition, if the tank is not returned within 30 days or if it is returned damaged, I understand that my credit card will be charged a \$1,200.00 replacement fee.

I also authorize Colorado Veterinary Specialists to put my credit card number on the Federal Express air-bill to pay the charges to ship the tank to it's destination and back to Colorado Veterinary Specialists.

By signing below I understand and agree to all of the above.

Print Name Here _____

Sign Name Here _____

Phone Number _____ Today's

Date _____

Value of Semen for Shipping Insurance \$ _____ (Additional Cost)

Cardholders Name: _____

Telephone Number: _____ FAX: _____

Circle one: Visa MC AMEX DISC CareCredit

CC# _____ CVV# _____

Expiration Date: _____ Telephone #(____) _____

Zip Code/Postal Code where credit card bill is sent: _____

I have read and understand the charges as outlined above and authorize the use of the credit card listed.

Signature: _____

**PLEASE FAX BACK TO 303-794-4881 with
International Semen Export Request Form**