



Pioneer Equine Hospital
 110501 Pioneer Avenue
 Oakdale, CA 95361
 Fax 209-847-5954
 Tel 209-847-5951



Wild Turkey Farm
 2995 Woodside Road #400
 PMB 378, Woodside, CA 94062
 Fax 650-851-7313
 Tel 650-529-9875

COOLED TRANSPORTED SEMEN (CTS) SHIPMENT REQUEST FORM

Mare Owner _____ Mare Name _____

Phone _____ Breed _____

Registration Number _____

Stallion _____

Shipment Method (circle which applies): Counter to Counter FedEx Pick Up

Ship to (contact person) _____

Address (no P.O.Boxes) _____

Airport _____

Alternate Airport _____

Airport Phone _____ Fax _____

Veterinarian _____

Veterinarian Phone _____ Fax _____

Credit Card: [] Visa [] Mastercard Credit Card # _____ Expiration Date _____

Special Instructions _____

PEH OFFICE USE ONLY

Fees paid and billing information:

Handling Fee: Amount \$ _____ Received from _____ Check # _____

[] Bill Stallion Owner _____