

2020 STALLION SERVICE PROGRAM – BREEDING DONATION CONTRACT

Please complete the following information, sign the contract, and return it to Cuttin With Shynia with a copy of the stallion's registration papers and a photocopy of the breeding contract. A Contract must be filled out for each stallion donated for each year that a breeding donation is made to the CWS Stallion Auction.

Completed forms can be faxed to (316) 462-0882 or mailed to Cuttin With Shynia Stallion Service Program, c/o Lee Ann Bates, 27113 W. Mills Ave., Plevna, KS, 67568. Questions can be directed to Cuttin with Shynia, c/o Lee Ann Bates (620)664-7230 or Susie Randles at (620) 353-3042. Don't forget to include a photo of the stallion or email one to [acrskansas@live.com](mailto:acrskansas@live.com)

(Please type or print)

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Name of Stallion \_\_\_\_\_

Stallion's Sire \_\_\_\_\_ Stallion's Dam \_\_\_\_\_

CWS Stallion Service Program breeding fee for 2020 \$ \_\_\_\_\_

Shipped semen from this stallion? Yes / No (circle) What dates will the stallion be available for breeding?  
Beginning \_\_\_\_\_ 2020 through \_\_\_\_\_ 2021

\*IT WIL BE THE MARE OWNERS RESPONSIBILITY TO CONTACT THE STALLION OWNER AND/ BREEDING FACILITY FOR ADDITIONAL FEES.

\*CUTTIN WITH SHYNIA OR NCHA IS NOT RESPONSIBLE FOR CHANGE OF FEES.

\*BOTH THE DONOR & THE BREEDING FACILITY WILL BE NOTIFIED WHEN THE BREEDING IS SOLD

Donor Information:

Name (as you want it listed in publications): \_\_\_\_\_

Contact Address: \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Web site: \_\_\_\_\_

Stallion will stand the 2020 Season at:

Name of breeding

Facility: \_\_\_\_\_

Name of contact person: \_\_\_\_\_ Web site: \_\_\_\_\_

Breeding Facility Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Breeding Facility Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Email

Address: \_\_\_\_\_

I have read this contract; I fully understand it and I agree to abide with all provisions of this agreement.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Please Print

name: \_\_\_\_\_

Please list

title: \_\_\_\_\_