



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  
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## Frozen Semen Release Authorization Form

This form must be completed by the semen owner, bitch owner, and cardholder and submitted to ICSB before frozen semen can be released. **This form is not a transfer of ownership. Please submit this form to arrive at ICSB at least 3 business days before the requested shipping date.** ICSB will confirm receipt of the form by email or phone; if you have not received a confirmation, please resend the form. If notice is less than two days, a Stat Fee will apply as follows: 1-business-day notice +\$65, Same-business-day notice +\$95. Shipments requiring delivery to or from an airport will incur additional charges by ICSB. It may not be possible to ship frozen semen if this form is received too late. **THIS FORM WILL EXPIRE 90 DAYS FROM THE DATE LISTED BY THE SIGNATURE OF 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 SHIPMENT.**

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

**Please circle the NUMBER OF VIALS TO RELEASE: ONE TWO THREE OTHER** \_\_\_\_\_  
 ICSB recommends ONE vial per insemination. Using more than the recommended number of vials has not been proven to increase conception rates.

Ship to: Veterinary Facility: \_\_\_\_\_

Attn: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

For use by: Bitch Owner: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

E-mail: \_\_\_\_\_

Registered Name of Bitch to be Bred: \_\_\_\_\_ Reg. #: \_\_\_\_\_

Preferred Date of Semen Shipment to Arrive On or Before: \_\_\_\_\_

**IF A DATE IS UNKNOWN AT THE TIME OF SUBMITTING THIS FORM, PLEASE ENTER "WILL CALL" FOR THE DATE OF SHIPMENT.**

This shipment will be insured by the shipper to cover the shipping tank replacement in the event of damage/loss during shipping. Additional insurance to cover the value of the semen may be purchased at the carrier's rate (usually UPS, FedEx, or Air Cargo), however, **many carriers will not insure perishable goods**, so insurance may not cover loss of the items shipped, if this occurs. If you wish to insure the contents, please indicate the amount, knowing the carrier may not honor the claim: \$ \_\_\_\_\_. **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, defective shipping containers, and shipping accident/damage, ICSB shall not be held liable for the loss, damage, or replacement value of the semen.** Shipping costs 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 shipping and preparing frozen semen from their account at ICSB. Frozen semen shipments are not completed until the shipping tank is returned undamaged to ICSB. Additional charges may be applied up to 6 months after shipment occurs. Please complete and return this form to Fax: (503) 676-8025 OR E-mail: ik9sb@aol.com. Postal service is not recommended and may delay the shipment.** ICSB policy is to provide use of the shipping tank for domestic shipments for 7 days at a charge of \$85 (some veterinary clinics will be higher). On the eighth day, a daily rental of \$15.00 applies until the shipping tank is returned, or until the replacement cost is reached. Use of Frozen Canine Semen Release Authorization Forms older than this current version (02/2022) are not valid or accepted. Prices are subject to change without notice.

FOR OFFICE USE ONLY: Ship Prep: \_\_\_\_\_ Tank Rental: \_\_\_\_\_ Date Shipped: \_\_\_\_\_  
 Stat Fees: \_\_\_\_\_ Shipping Charges Out: \_\_\_\_\_ Back: \_\_\_\_\_ Tank #: \_\_\_\_\_

TERMS AND CONDITIONS FOR UTILIZING YOUR STUD DOG'S FROZEN SEMEN

- 1. Check your account with ICSB. Your account must be paid in full in order for frozen semen to be released for shipment. If you have any questions about your account, please call (503) 663-7031 or email ik9sb@aol.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. We recommend progesterone testing and communication with your vet for the best insemination timing.
3. Allow 3 to 4 days for ICSB to prepare the shipment of the frozen semen. Usually, ICSB can ship sooner than this, however, allow a safe margin of time for the shipment to be handled. It is very difficult, or may be impossible, to ship semen with just one day's notice before a bitch needs to be bred, or on a holiday or weekend. For shipments requested with less than 2 days' notice, or ASAP, an additional handling Stat Fee will be charged. (Normally a 24-hour period of time is required to charge the shipping tank prior to retrieval of the frozen semen and transfer to the shipping tank).
4. When you request ICSB to ship your dog's frozen semen, please be sure you complete this form, listing the name, address, and telephone number of the shipment destination. Specify how many vials of semen to release for shipment. In most cases, 1 or 2 vials are shipped. We accept Visa, MasterCard, Discover, or American Express for the shipping charges. In some instances, cash, cashier's check, or a money order may be accepted for pick up of frozen semen. Please note that ICSB cannot release frozen semen without the completed Frozen Semen Release Authorization Form. Please note, a completed Frozen Semen Release Authorization Form is not a transfer of ownership.
5. Shipping charges, tank rental, and return are ultimately the responsibility of the semen owner. It is often very expensive to ship frozen canine semen; if cost is a concern, please call for a shipping estimate. We are happy to provide an approximate quote for shipping. At this time, we ship the frozen semen one of three ways: UPS, FedEx, or Air Cargo. For domestic shipping, there is a tank rental charge of \$85 (some Veterinary clinics will be higher) for the first 7 days, beginning on the day the tank leaves our facility. On the 8th day, a daily tank rental fee of \$15 is charged until the tank is returned or until the replacement cost of the tank is reached. We recommend for the semen owner to emphasize the rental fee to the recipient, and that it is necessary for the bitch owner or veterinarian at the bitch's location to return the shipping tank as quickly as possible to avoid additional rental charges. 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, incorrect semen being inseminated, defective storage tanks, defective shipping containers, and shipping accident/damage, 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 is not responsible for differences in thaw rate and quality of semen as determined by inseminator.
8. You agree that when you have frozen semen removed from ICSB, such as for shipment for use and insemination, ICSB may not and shall not be held liable or responsible for any damage to semen 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 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: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_