Pacific Coast Cutting Horse Association

2018 Stakes Stallion Service Auction – Breeding Donation Agreement

Please complete the following information, sign agreement and return to the PCCHA with a copy of the Stallions papers, a photograph of the stallion and a photocopy of the breeding contract.

Name of Stallion	Year Foaled	Registration #
Breed registry (AQHA, PCHA)	Color (if paint, plea	ase indicate Overo or Tobiano)
Advertised/Established Breeding Fee for	2018 \$	
PCCHA Stakes Stallion Service Auction (Do not include any fees the mare owner must pay fee for the breeding facility, list fee as \$1500 then li	to the breeding facility, example; if advertised b	booking or chute fees) \$ reeding fee is \$2000 but includes a \$500 o
IMPORTANT: Please list any additional c (Chute fees, mare care, in foal fees, vet fees		owner and the amount of the fee.
Chute Fee \$ Booking Fee \$	Mare Ca	are \$day (wet) \$day (dry)
Will you ship semen from this stallion? NO	YES (If yes, what are the total fees of the	semen shipment to the mare owner?)
Comments on stallion (Awards, lifetime earning	s, Rankings, etc) Use separate page if necess	•
Donor Information:	G FACILITY WILL BE NOTIFIED W	
Donor Information: Name (as you want it listed)		
Donor Information: Name (as you want it listed) Contact Address:		
Donor Information: Name (as you want it listed) Contact Address: Phone Number:	City, State, and Zip:	
Donor Information: Name (as you want it listed) Contact Address: Phone Number: Email Address:	City, State, and Zip: Fax Number:	
Donor Information: Name (as you want it listed) Contact Address: Phone Number: Email Address: STALLION will stand 2015 season at:	City, State, and Zip: Fax Number: Web site:www	
Donor Information: Name (as you want it listed) Contact Address: Phone Number: Email Address: STALLION will stand 2015 season at: Name of breeding facility:	City, State, and Zip: Fax Number: Web site:www	
Donor Information: Name (as you want it listed) Contact Address: Phone Number: Email Address: STALLION will stand 2015 season at: Name of breeding facility: Breeding Facility Address:	City, State, and Zip: Fax Number: Web site:www City, State, Zip	
Donor Information: Name (as you want it listed) Contact Address: Phone Number: Email Address: STALLION will stand 2015 season at: Name of breeding facility: Breeding Facility Address: Breeding Facility Phone #:	City, State, and Zip: Fax Number: Web site:www City, State, Zip Fax Number:	
Donor Information: Name (as you want it listed) Contact Address: Phone Number: Email Address: STALLION will stand 2015 season at: Name of breeding facility: Breeding Facility Address: Breeding Facility Phone #: Name of Contact Person:	City, State, and Zip: Fax Number: Web site:www City, State, Zip Fax Number:	
Donor Information: Name (as you want it listed) Contact Address: Phone Number: Email Address: STALLION will stand 2015 season at: Name of breeding facility: Breeding Facility Address: Breeding Facility Phone #: Name of Contact Person:	City, State, and Zip: Fax Number: Web site:www City, State, Zip Fax Number: Fax Number: Website: www Website: www website: www Fax Number: Fax Number: Website: www Fax Number: Website: www	ovisions of this agreement.

PCCHA is not responsible for any fees or charges that are incurred as a result of this breeding Please include a photocopy of the stallion's papers AND a photocopy of the breeding contract. Please include a photograph of the stallion for promotional purposes. Complete forms must be faxed to 209-727-5743 or mailed to PCCHA Stakes Stallion Service Auction, PO Box 108, Lockeford, CA 95237. Questions can be directed to the PCCHA office at 209-727-5779 or info @pccha.com