



Hockenson Quarter Horses
1040 160th Street, Nichols, Iowa 52766 • 319.330.6862 • rhockenson@hotmail.com
www.hockensonquarterhorses.com

2026 BREEDING CONTRACT FOR HQ HELLUVA CAT

This contract dated on the _____ day of _____, 20____ is between _____, herein referred to as Mare Owner(s) and **Hockenson Quarter Horses** herein referred to as Breeder. Mare owner has engaged one service to the stallion **HQHELLUVA CAT**, Reg. No. **5769766** for the mare _____, Reg. No. _____, for the **2026** breeding season. The Mare Owner agrees to pay a breeding fee of \$1500 payable upon execution of this contract. The following conditions of service are mutually agreed between Mare Owner named above and Hockenson Quarter Horses upon execution of this contract:

1. Stallion fee is due with the signed contract. Mare Owner agrees to provide a photocopy of the mare's registration papers with the breeding contract.
2. Semen is collected, stored, frozen, and distributed by Abraham's Equine Reproduction Center, located at 2550 Hindman Road, Marion, Iowa 52302. **Payment by credit card to Abraham's Equine Clinic is required prior to shipment for all collection and shipping costs. All shipment requests must be made at least 24 hours in advance. Shipment requests can be made Monday thru Friday 8am-5pm. Collection days are Monday, Wednesday, and Friday. Semen orders must be placed the day before by calling 319-366-6441. Confirm or cancel order no later than 10 a.m. central time on collection days. \$265 collection/insemination fee for on-farm mares (paid once per breeding season-other fees will apply; including but not limited to mare care, medications, etc.). \$265 per cooled semen pick up (mare owner or representative will travel to AEC to pick up the collection for insemination off site). \$345 per cooled semen shipment-priority overnight (includes collection and FedEx fees). \$530 per cooled semen shipment for Counter to Counter (includes collection, courier, and airline fee). Semen shipping box must be returned to AEC within 7 days of receipt, or a \$30 late fee will be charged to your credit card.** Shipments may only be sent on a Friday if Saturday delivery is available in your area. Additional fees for Saturday delivery will apply. All cancellations must be made by 10 am the day of shipping or \$275 container fee will still be charged for frozen shipments. ***Please note that repro service costs are subject to change, such as collection fees and container fees, please see repro services list for a complete listing of services and prices for AEC or contact them directly with questions.*
3. All shipping expenses (FedEx shipping fee to and from Cedar Rapids, Iowa to requested address) and container fee (\$275/shipment) are the responsibility of the mare owner and should be paid directly to Abraham's Equine Clinic (625 Dows Road SE, Cedar Rapids, Iowa 52403 • 319.366.6441). If Abraham's Equine Clinic provides the shipping container, the container is the property of Abraham's Equine Clinic. Should the mare owner fail to return the shipping container within 2 business days after receipt, a \$275/day rental fee will be charged. After 7 days \$1200 will be charged to Mare Owner to cover the cost of the container or if there is any damage to the container. Any loss or damage to the container will be the responsibility of the mare owner. Containers will be shipped with a prepaid FedEx return label. The cost of returning the shipping container is the responsibility of the mare owner and will be charged prior to the shipment. Abraham's Equine Clinic has limited number of dry shippers, it is best to request the frozen



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semen well ahead of time to avoid delay since orders are shipped on a first serve basis if you are requesting frozen semen.

4. If requesting frozen semen, mare owner or veterinarian must have a storage tank to transfer frozen semen upon arrival so that the shipper can be returned immediately.
5. Insemination must be done by a licensed veterinarian at a reputable clinic.
6. Mare should be healthy and in sound breeding condition. A veterinarian letter stating proof of negative uterine culture will be required prior to second shipment if requesting frozen semen and the mare did not settle the first time. This must be mailed to info@abrahamsequine.com Attn: Emilie.
7. Stallion fee includes one breeding dose of cooled semen. Collection fees, shipping, and all other reproduction services are the responsibility of the mare owner. (Please contact Abraham's Equine Clinic for fee information). If extra doses of frozen semen are purchased for a 2026 breeding and are not used on this mare, a new contract must be completed and paid in full before the extra frozen semen is put in a mare. Please contact Hockenson Quarter Horses for a new contract.
8. Frozen will be sent only if fresh is not available or with prior owner consent. Frozen upon request while cooled is available will cost an additional \$200 per dose. This fee must be paid to stallion owner prior to shipping.
9. Insemination must be done by a licensed veterinarian or under the guidance of a licensed veterinarian if performed by a breeding assistant. Frozen insemination must be done by a licensed veterinarian.
10. If the mare does not conceive after two cycles, a uterine culture, cytology, or biopsy is required before any further semen is shipped. Please email results to info@abrahamsequine.com Attn: Emilie.
11. Mare owner agrees to have the mare checked by ultrasound and to provide Hockenson Quarter Horses with the results of the pregnancy exam no later than 30 days after the examination of the mare. Failure to provide results of pregnancy exam could result in loss of rebreed privileges.
12. If the mare aborts or fails to conceive, she may be re-bred the following year only, provided all fees have been paid with the original contract. Collection and shipping fees apply for cooled semen. If frozen is specifically requested, a re-breed fee of \$200 per dose of frozen semen will be required by the mare owner as well as any applicable container and shipping fees. **Pneumabort vaccines must be given at 5, 7, and 9 months of pregnancy. Proof of Pneumabort vaccines will be required in the case of a rebreed due to abortion. All rebreed contracts will require a vet letter stating when the mare was checked and found open.**
13. Live foal guarantee: If foal is unable to stand and nurse within 24 hours of birth, born dead or is recommended to be euthanized by vet due to life threatening birth defects, a rebreed contract will be provided to the mare owner, which must be used that year. A letter from vet will be required.
14. The mare owner agrees to use all semen provided by the Agreement for the mare in this contract and no other. A substitute mare may be used only if the original mare is deceased or is deemed unfit for breeding by an accredited veterinarian and must be approved by Hockenson Quarter Horses.
15. This contract is not transferable if mare is sold.



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16. This contract can't be sold.
17. Mare owner agrees to notify Hockenson Quarter Horses if this is an embryo transfer mare. In the event of multiple embryos from a single flush, mare owner agrees to pay a Stallion Fee of \$1500 for each additional live foal. Additional breeder's certificates will be issued upon receipt of all applicable fees being paid.
18. A breeder's certificate will be issued upon notification of the birth of the foal, only after confirmation that all fees are paid in full including any board bills, shipping charges, container fees, or veterinary charges that were owed by the mare owner.
19. Abraham's Equine Clinic only assumes responsibility to ship semen in viable condition and shall not be held liable for contamination of semen during and after shipment, loss of viability, or any costs arising from shipments delayed, damaged, or lost in transit. Abraham's Equine Clinic does not guarantee the fertility of any stallion but agrees to ship only commercial quality frozen semen with a documented post thaw motility of 30% or greater.
20. Should the above-named stallion die or become unfit for service for any reason and frozen semen is not available at the time, then this contract shall become null and void and both parties are relieved from any further obligation hereunder, and any monies paid by the mare owners shall be refunded if the mare is not settled or would qualify for rebreed privileges.
21. There will be no exceptions to the terms of this contract, and it is not transferable unless provided in writing and signed by all parties.
22. The parties hereto specifically agree that this Agreement shall be construed, governed, and interpreted by and in accordance with the internal laws of the State of Iowa, and the proper place of venue shall be Muscatine County, Iowa. Under Iowa Law, Section 673, A person, including a domesticated animal professional, domesticated animal activity sponsor, the owner of the domesticated animal, or a person exhibiting the domesticated animal, is not liable for the damages, injury, or death suffered by a participant or spectator resulting from the inherent risks of a domesticated animal activity.



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Mare Owner Information:

(Owner's name as shown on registration records)

Address

City/State/ Zip

Home Phone

Cell Phone

Email Address

Signature

Date

Hockenson Quarter Horses (for office use only)

Approved by: _____

Date Received: _____

Booking fee: \$ _____ Check Paid # _____

Balance Stud Fee: \$ _____ Check Paid # _____

Date Signed Contract Mailed: _____

Abraham's Equine Clinic (for office use only)

Date semen shipped: _____

Shipping Fees Charged: _____

Container Fees Charged: _____

Date container returned: _____

I will be picking semen up directly from Abraham's.

I will be having Abraham's complete AI.

I will be having semen shipped.

****IF SHIPPING SEMEN, PLEASE COMPLETE THE NEXT PAGE.**



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Shipped Semen Order Form

Stallion:

Mare Name _____

Mare Owner _____

Address _____

Phone _____ Alt Phone _____

Email _____

Vet Clinic _____ Vet Phone _____

Shipping Address _____

Saturday Delivery _____

Best Cell # to Text _____ Airport _____

Tracking info _____

Credit Card Info:

Card Number _____ Security Code _____

Expiration Date _____ Code _____

Authorization _____

Signature & Date _____

For Office Use Only: 2025 contract uploaded

Collection Date	Date & Time Confirmed	Overnight CtoC P/U	Total Charge	CC Ran	Other Information
			\$		
			\$		
			\$		
			\$		