



**Record of Collection Ownership**

Brittmoore Animal Hospital  
 1236 Brittmoore Rd.  
 Houston, Texas 77043  
 Office: 713-468-8253 Fax: 713-468-8995  
 info@brittmooreanimalhospital.com

**Please complete Record of Collection Ownership before collection takes place.  
 All stud dog owner(s) listed on the Registration Certificate have to release the collection to the new owner**

**Stud Dog Information from Registration Certificate**

Stud Dog Owner (s) Name			
Registration Name			
Registration Number		Breed	

**Semen Release**

As owner(s) of the Stud Dog stated above, I (we) release ownership of the semen collection to the below owner. I (we) understand that the collection of the stud dog will be reported to Synbiotics and the agency responsible for registering the stud dog in the below owners name.

I (we) release the above stud dog for collection of semen for these dates: \_\_\_\_\_ to \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

\* If Applicable

\*Co-Owner Signature \_\_\_\_\_ Date \_\_\_\_\_

\*Co-Owner Signature \_\_\_\_\_ Date \_\_\_\_\_

\*Co-Owner Signature \_\_\_\_\_ Date \_\_\_\_\_

**Collection Owner**

Semen Owner's Name			
Address			
Phone Number		E-mail Address	