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FROZEN CANINE SEMEN OWNER RELEASE FOR DISPOSAL

This document, when completed, signed, witnessed and dated, requests ICSB-San Diego to dispose of the frozen canine semen listed below. All co-owners of this frozen semen must sign this document in order for the semen to be destroyed.

I _____
Name of present owner, co-owners of frozen semen

Do hereby transfer all rights of ownership and interest in the following frozen semen to International Canine Semen Bank-San Diego. This request is for the frozen canine semen on the dog listed below to be destroyed/ disposed of:

Registered Name of Dog	Registry
Registration Number	Breed

The following semen from the above dog is to be destroyed.
Date of collection: _____ Number of vials: _____
Date of collection: _____ Number of vials: _____
_____ All semen from above described dog

Signature here if you wish to destroy all of the frozen semen on the dog

I/ we request that the specific frozen semen listed above be destroyed:

Date signature (s) of present semen owner and co-owner(s)

printed name of semen owner/ coowner

address present semen owner/ coowner

telephone number: () _____

witness signature: _____