



310 COURT SQ. SANFORD NC 27330 ● 919-292-6376 ● infinityk9@gmail.com

AUTHORIZATION TO DESTROY STORED SEMEN

****PLEASE NOTE: THERE IS A \$25.00 ADMINISTRATIVE FEE****

By signing below, I _____, as owner of the semen from the below named dog, agree to Infinity Canine, LLC and its employee's to destroy all semen currently being stored in liquid nitrogen its facility located within Sanford Animal Hospital. By doing this, I understand that once destroyed, there will no longer be semen stored with Infinity Canine, LLC on the below named dog.

I also understand that all debts to Infinity Canine, LLC must be paid for in full prior to destruction. If debts are not paid, storage of the semen will be continued and further charges may be added to the account with payment expected on the account.

Infinity Canine, LLC and its employees, will not be held responsible for the destruction of the semen after the below signed date.

Registered Name of Dog: _____

Call name of Dog: _____ Registration Number: _____

Number of straws vials to be destroyed: _____

I understand that all specified semen of the above named dog, will be destroyed from the below signed date and will not be available for use in any manner.

Printed Name of Owner: _____

Signature of Owner: _____ Date: _____

Owner's current address: _____
