



### Step 1: Submitter's Information

Submitter's Name: *(please print legibly)* \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: *(required)* \_\_\_\_\_

### Step 2: Tested Animal #1's Information

Call Name: \_\_\_\_\_  Male  Female Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Breed: \_\_\_\_\_ Coat Color: \_\_\_\_\_

Registered Name: \_\_\_\_\_

Registration #: \_\_\_\_\_ Microchip / Tattoo: \_\_\_\_\_

**Select Service(s)**  Parentage Evaluation *(select relationship below)*  Inherited Trait / Disease Testing *(list each test required)*

**Required:**  Sire  Dam  Progeny / Offspring

DNA Profile *(for animal identification)*

### Tested Animal #2's Information (Use Back Side for Additional Tested Animals)

Call Name: \_\_\_\_\_  Male  Female Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Breed: \_\_\_\_\_ Coat Color: \_\_\_\_\_

Registered Name: \_\_\_\_\_

Registration #: \_\_\_\_\_ Microchip / Tattoo: \_\_\_\_\_

**Select Service(s)**  Parentage Evaluation *(select relationship below)*  Inherited Trait / Disease Testing *(list each test required)*

**Required:**  Sire  Dam  Progeny / Offspring

DNA Profile *(animal identification)*

### Step 3: Results & Payment Information

Results Delivery:  Email *(Included, Free)* Amount Paying: \_\_\_\_\_

Payment Type:  Prepaid *(reference number)* \_\_\_\_\_  Check / Money Order Enclosed

Credit Card *(MasterCard, VISA, Discover or Amex)* Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_/\_\_\_\_

Name: *(exactly as it appears on card)* \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Sign Here** Cardholder's Signature: **X** \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

### Step 4: Statement of Agreement

I hereby certify that the information appearing on this form is correct and true to the best of my knowledge. I hereby affirm that the DNA sample was collected and labeled properly. I understand that all test results and documentation will be provided to only me, unless otherwise specified.

**Sign Here** Signature: **X** \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

### Tested Animal #3's Information (Step 2 Continued from Front Side)

Call Name: \_\_\_\_\_  Male  Female Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Breed: \_\_\_\_\_ Coat Color: \_\_\_\_\_

Registered Name: \_\_\_\_\_

Registration #: \_\_\_\_\_ Microchip / Tattoo: \_\_\_\_\_

**Select Service(s)**  Parentage Evaluation *(select relationship below)*  Inherited Trait / Disease Testing *(list each test required)*

**Required:**  Sire  Dam  Progeny / Offspring

DNA Profile *(animal identification)*

### Tested Animal #4's Information

Call Name: \_\_\_\_\_  Male  Female Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Breed: \_\_\_\_\_ Coat Color: \_\_\_\_\_

Registered Name: \_\_\_\_\_

Registration #: \_\_\_\_\_ Microchip / Tattoo: \_\_\_\_\_

**Select Service(s)**  Parentage Evaluation *(select relationship below)*  Inherited Trait / Disease Testing *(list each test required)*

**Required:**  Sire  Dam  Progeny / Offspring

DNA Profile *(animal identification)*

### Tested Animal #5's Information

Call Name: \_\_\_\_\_  Male  Female Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Breed: \_\_\_\_\_ Coat Color: \_\_\_\_\_

Registered Name: \_\_\_\_\_

Registration #: \_\_\_\_\_ Microchip / Tattoo: \_\_\_\_\_

**Select Service(s)**  Parentage Evaluation *(select relationship below)*  Inherited Trait / Disease Testing *(list each test required)*

**Required:**  Sire  Dam  Progeny / Offspring

DNA Profile *(animal identification)*

### Tested Animal #6's Information

Call Name: \_\_\_\_\_  Male  Female Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Breed: \_\_\_\_\_ Coat Color: \_\_\_\_\_

Registered Name: \_\_\_\_\_

Registration #: \_\_\_\_\_ Microchip / Tattoo: \_\_\_\_\_

**Select Service(s)**  Parentage Evaluation *(select relationship below)*  Inherited Trait / Disease Testing *(list each test required)*

**Required:**  Sire  Dam  Progeny / Offspring

DNA Profile *(animal identification)*