



DNA Testing Submission Form

Step 1: Submitter Information

Submitter's Name: *(please print in all caps)* _____

Address: _____

City: _____ State: *(or Country if applicable)* _____ Postal Code: _____

Phone #: _____ Email: *(required)* _____

Step 2: Results & Payment Information (If paying by check, make payable to DNA Diagnostic Center)

Results Delivery: Email (no additional fee) Standard USPS (~ 3 weeks for delivery + \$5.00 fee) Amount Total: _____

Payment Type: Prepaid: *(please write order# or case #)* _____ Check/ Money Order Enclosed

Credit Card: *(Mastercard, Visa, Discover, American Express)* _____ Exp: _____

Billing Address: _____

City: _____ State: *(or Country if applicable)* _____ Postal Code: _____

Sign Here Cardholder Signature: *(required)* _____ Date: _____

Step 3: Tested Animal #1 (* = Required)

*Call Name: _____ * Male Female *Date of Birth: _____

*Breed: _____ *Coat Color: _____

Registered Name: _____ Registry: _____

Registry #: _____ Microchip: _____ Tattoo: _____

*Test Requested:

Inherited Trait or Disease Test(s): *(Please write the name of the test on the line below e.g. DM, EIC, B locus, Coat Length)*

Parentage Verification: (do not check this box unless you are sending samples for parentage evaluation)

This sample is for the: Dam Sire Offspring Previously tested by DDC for Parentage or Profile? No Yes

If this sample is for the Dam or Sire, are they related to any other Dam/Sire in this evaluation? No Yes

If you marked "yes," please list who & how they are related on the line below (e.g. the sires are father & son)

DNA Profile: (do not check this box unless you are sending samples for a DNA profile)



DNA Testing Submission Form

Tested Animal #2 (* = Required)

*Call Name: _____ Male Female Date of Birth: _____

*Breed: _____ *Coat Color: _____

Registered Name: _____ Registry: _____

Registry #: _____ Microchip: _____ Tattoo: _____

*Test Requested:

Inherited Trait or Disease Test(s): (Please write the name of the test on the line below *e.g. DM, EIC, B locus, Coat Lenth*)

Parentage Verification: (do not check this box unless you are sending samples for parentage evaluation)

This sample is for the: Dam Sire Offspring Previously tested by DDC for Parentage or Profile? No Yes

If this sample is for the Dam or Sire, are they related to any other Dam/Sire in this evaluation? No Yes

If you marked "yes," please list who & how they are related on the line below (e.g. the sires are father & son)

DNA Profile: (do not check this box unless you are sending samples for a DNA profile)

Tested Animal #3 (* = Required)

*Call Name: _____ Male Female Date of Birth: _____

*Breed: _____ *Coat Color: _____

Registered Name: _____ Registry: _____

Registry #: _____ Microchip: _____ Tattoo: _____

*Test Requested:

Inherited Trait or Disease Test(s): (Please write the name of the test on the line below *e.g. DM, EIC, B locus, Coat Lenth*)

Parentage Verification: (do not check this box unless you are sending samples for parentage evaluation)

This sample is for the: Dam Sire Offspring Previously tested by DDC for Parentage or Profile? No Yes

If this sample is for the Dam or Sire, are they related to any other Dam/Sire in this evaluation? No Yes

If you marked "yes," please list who & how they are related on the line below (e.g. the sires are father & son)

DNA Profile: (do not check this box unless you are sending samples for a DNA profile)



DNA Testing Submission Form

Tested Animal #4 (* = Required)

*Call Name: _____ Male Female Date of Birth: _____

*Breed: _____ *Coat Color: _____

Registered Name: _____ Registry: _____

Registry #: _____ Microchip: _____ Tattoo: _____

*Test Requested:

Inherited Trait or Disease Test(s): (Please write the name of the test on the line below *e.g. DM, EIC, B locus, Coat Lenth*)

Parentage Verification: (do not check this box unless you are sending samples for parentage evaluation)

This sample is for the: Dam Sire Offspring Previously tested by DDC for Parentage or Profile? No Yes

If this sample is for the Dam or Sire, are they related to any other Dam/Sire in this evaluation? No Yes

If you marked "yes," please list who & how they are related on the line below (e.g. the sires are father & son)

DNA Profile: (do not check this box unless you are sending samples for a DNA profile)

If additional space is needed, this submission form may be copied.

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. Dogs owned by a third party are included with their permission. I understand that all test results and documentation will be provided to only me, unless otherwise specified.

Sign Here Signature: _____ Date: _____

Mail samples to: (it is recommended to use a shipping service with tracking)

DDC Veterinary

1 DDC Way

Fairfield, OH

45014

Telephone: 1-800-625-0874

Website: dnacenter.com/testing-pets-vets/ Email: contact@vetdnacenter.com