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Sample number  
(don't fill, if you don't know)



## Order form for Horses genetic testing

### Name of the veterinary clinic

(Do not fill in, if the customer is a breeder or an owner of the horse)

Tax-ID-No.: \_\_\_\_\_

E-mail: \_\_\_\_\_

**To be invoiced to:**     clinic     breeder

**Payment:**     cash     bank transfer

### Owner/Breeder

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

Street: \_\_\_\_\_

Post code, town: \_\_\_\_\_

Country: \_\_\_\_\_

Tel.: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Send the test result report by:**     e-mail     post + e-mail (+2,50 €)

card (PayPal service) (+2,50 €)

### HORSE

**Sex:**     female     male

**Sample type:**     swab     blood     horsehair

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

Breed: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Microchip: 

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 (usually 15 digits)

Tattoo No.: \_\_\_\_\_ Pedigree No.: \_\_\_\_\_

Orders accepted on-line are free of charge. Extra charge (2 €) for order forms in paper.

**Why to make an on-line order? No extra charge (2 €), faster handling and no mistyping!**

**Note:** Kennel Club can apply specific rules for the sample collection. Samples collected without any identity verification by the authorized person might not be recognized by your Kennel Club.

*Hereby, I confirm that the animal identification (microchip / tattoo) complies with the facts stated above. I confirm, I have collected and labelled the sample(s):.*

Vet's name and stamp: \_\_\_\_\_

I hereby grant my approval to Genomia s.r.o. to be informed about their services in veterinary genetic and allergology, discounts and sample collection events. For more information visit [www.genomia.cz/en/terms\\_conditions](http://www.genomia.cz/en/terms_conditions)

Upon completing this order, I agree to Genomia's General Business Terms and Conditions and, at the same time, I give my informed consent to store and process my personal data. For more information visit [www.genomia.cz/en/terms\\_conditions](http://www.genomia.cz/en/terms_conditions)

The biological sample sent together with this order form contains Category I animal by-products (EC No. 1069/2009).

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Sample number  
(don't fill, if you don't know)

**Tick the tests required:**

- PSSM (Polysaccharide Storage Myopathy)\*
- WFFS (Warmblood Fragile Foal Syndrome)
  
- DNA profile (in compliance with Act No 154/2000 Coll.)
- Parenthood verification - define

mother: \_\_\_\_\_

father: \_\_\_\_\_

\* *Partnerlabor*