

American Shetland & Derivative Association of New Zealand Inc



DATE

DNA FORM

Return Form To: The Registrar PO BOX 2146, Stortford Lodge, Hastings, 4153

SUBMITTER

OWNER SIGNATURE

The Registrar
American Shetland Association of New Zealand Inc
PO BOX 2146
Stortford Lodge
Hastings 4153

PLEASE SEND MASSEY INVOICE TO THE TREASURER

Kristi Churches 483 Pine Valley Road, RD2 Silverdale Auckland 0992

ACKNOWLEDGEMENT

The submitting owner acknowledges that the samples are submitted on the condition that all profiles derived from the samples will be incorporated into the Massey database to be solely used for the verification of the parentage of any animal at any time that is applying for registration with American Shetland Association of NZ Inc. Massey will store the samples indefinitely and will only release them if requested in writing to the owner as identified on this submission form. Massey and the American Shetland Association of NZ Inc will maintain client confidentiality at all times. The owner verifies that the animal information submitted on this form is true and correct.

SUBMITTERS SIGNATURE	CAPACITY OF SIGNATORY

Instructions:

Pull 30-40 mane or tail hairs with roots attached. Only one sample per horse is required to run multiple tests.

PLEASE PLACE HAIR IN AN ENVELOPE AND STAPLE TO THIS FORM. (Please make sure that no hairs are exposed)

PLEASE NOTE: If you select to have your horse Parent Qualified and the resulting report excludes either parent in the case of purebreds or one parent for partbreds on the registration form, your papers will be held until the correct parents are located.