

GENOME BREEDING VALUE CONTRACT

The undersigned assigns the KWPN of Ermelo to perform an OC DNA test and estimate the genome breeding value of the horse/horses:

Horse registration no.	Name of horse

The client must provide a hair sample.

Fee to be paid by the client to KWPN of North America:

NUMBER	TEST	price per unit	Total
	OC DNA test	\$200.00 per horse	
	OC DNA test		
	OC DNA test		
TOTAL			

The 'General Terms & Conditions for Genome Breeding Values' apply, as do the statutes and regulations of the KWPN. The client declares to have received a copy of the 'General Terms & Conditions for Genome Breeding Values', and is in agreement with same. The data obtained and collected in the context of the DNA test is owned and managed by the KWPN. The client receives the genome breeding value or values for their own use.

Client

KWPN-NA membership no:
 Name:
 Address:
 City:
 State/Province:
 Zip Code/Postal Code
 Country:
 Telephone number:
 Email address:

Date:	Signature:
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Please return the completed contact with DNA Sample to:

*KWPN of North America
 4037 Iron Works Parkway, Suite # 140
 Lexington, KY 40511*

Horse DNA Submission
Form-OCD Testing

Instructions:

1. Please do not write on this form. Contact the registry for corrections.
2. Thoroughly wash and dry your hands.
3. Pull (DO NOT CUT) 20-30 tail or mane hairs by wrapping hairs around forefinger. For foals, use tail hairs only. Grasp hair close to the animal's body to insure roots are included. Pull straight toward your body. Visually check that roots are attached to hair. DO NOT TOUCH ROOT BULBS.
4. Place sample in shaded box (below) with roots at left. Tape in place with tape over hair shaft on right.
5. Fold submission form backwards so that barcode and identification are on the outside and hair is covered. See fold lines for details. Do not seal submission form with tape or staple shut.
6. Place in envelope and mail to the address below.
7. If mailing from outside the United States, a current import permit must accompany the sample.

Mail To:

KWPN-NA
4037 Iron Works Parkway,
Suite 140
Lexington, KY 40511

Second fold (Fold back to cover hair. Do not cut, tape or staple)

KWPN of North America

Owner

Name:
Address:

Animal being tested

Name:
Registration:
Barn Name:
Color:
Date of Birth: Sex:
Breed:
Microchip:

First fold (Fold back. Do not cut, tape or staple)

Place Roots Here		
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Pull 20-30 tail or mane hairs of animal being tested and place above. Only one animal per form.