

Molecular (DNA) Testing Application Form

Orivet Genetic Pet Care
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INTERNAL USE ONLY

S B C SE

Duplicate Barcode

R&D

Recollection (Lab ID)



Owner's Name:

Please Tick: New Client Existing Client Associated Club Member

1 Address:

Suburb: P/code: State: Country:

Contact No: Mobile No:

Email:

*Required for login access

TEST REQUIRED & ANIMAL'S DETAILS FOR A LIST OF ALL DISEASES AND CODES REFER TO BACK OF THIS SHEET

Canine (Dog): Feline (Cat):

Code Test 1: Code Test 2: Code Test 3:

Full Canine Breed Profile
Includes all diseases, traits and a DNA Profile for your breed

Canine Breed ID
Determine the breed of your dog

Full Feline Genetic Screen
Includes all diseases & traits

Full Feline Disease Profile
Includes all diseases

Full Feline Trait Profile
Includes all traits

Barcode Sticker
Barcode can be found inside the Swab Packaging

Write or Place Barcode Sticker Here

If you require Parentage Confirmation

This sample is: (Please Tick One) Dam Sire Progeny

Dam & Sire already profiled by Orivet: No Yes (Please list lab ID or pet names)

Registered Name:

Pet Name: DOB: / / Sex: Male Female

2 Colour:

Breed:

Registration No: Microchip No:

PAYMENT DETAILS For all charges please see the Orivet DNA fee schedule or refer to website No samples will be processed without payment details

Pay ONLINE and receive a 10% Discount (Please submit confirmation of payment with form)

Method of Payment: **PayPal** PayPal Account: admin@orivet.com.au **eft** **Pre-paid Online** Visit orivet.com.au and go to our Store

If paying via Electronic Funds Transfer (EFT)

Australian Clients: Account Name: ORIVET Genetic Pet Care. BSB: 033-047. Account Number: 608145.
For All International Clients (OUTSIDE AUSTRALIA)
 Account Name: ORIVET INC. (USA). TD Bank Account Number: 4309542531. Routing Number: 031201360. SWIFT Code: NRTHUS33XXX.

Please Note: these methods do not qualify for the 10% discount. (Recommend Retail Prices Apply)

MONEY ORDER VISA MasterCard CHEQUE Make cheques payable to: "Orivet Genetic Pet Care" VOUCHER

Cardholders Name:

Credit Card No: Expiry Date: /

\$ CCV No: Signature:

Last 3 digits located on the back of your card

OWNER'S CONSENT

Samples are the property of the owner and cannot be used for any future research or passed onto any third parties without owners consent.

Owners who are members of a particular breed club or part of an approved breeding scheme consent for the statistical information to be passed onto those approved schemes.

4

Signature

By signing above I accept the terms and conditions as outlined on the web site.

By signing below I consent to be notified of any carrier or affected results, whether the test was requested or not.

Signature

COLLECTOR'S DETAILS

I hereby acknowledge that the sample identified on this application form is from the animal identified above.

Please Tick: Collected by Owner (Details below not required)

5 Collected by a Collection Agent Agent ID:

Collected by a Vet Vet to receive a copy of results

VGA Exam Included

Date of Collection: / /

Collector's Name:

Name of Clinic:

Clinic Email:

Please Note: No Collection Agents receive results.

Signature

