

Animal Information (females only)

Registration #: _____ Breed: _____ Country: _____

Name: _____ Herd Management ID: _____

Owner / Submitter Information (bill to)

Prefix: _____ Phone #: _____

Genomic Test Requested:

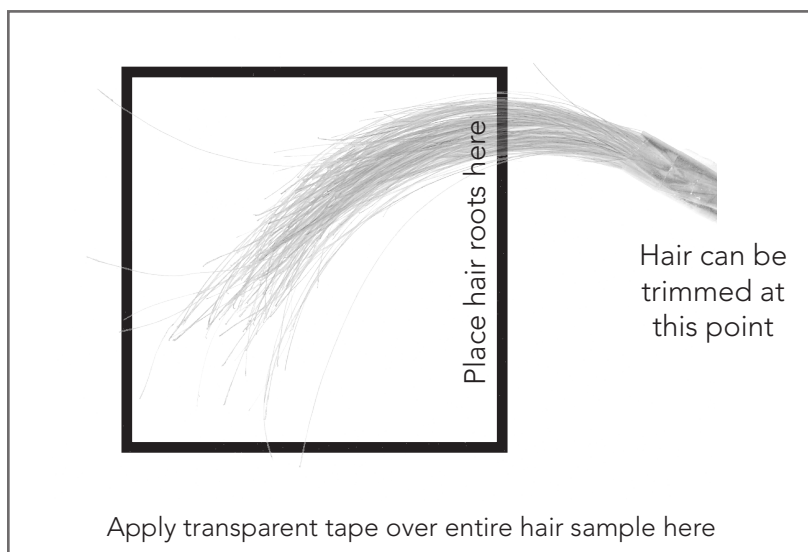
3K SNP Chip 50K SNP Chip

Signature: _____

DNA Sample Provided:

Hair (see instructions below)

Nasal swab (sample kits must be ordered in advance; include this form with submitted kits)



Hair collection: Pull at least 40 hairs from a clean/dry tail with visible hair follicles (roots). Bundle hairs on paper above (see diagram) and place a large piece of **transparent tape** over the hair follicles (roots). Cut excess hair keeping the follicles.

Mail to: Holstein Canada
 Attention: Genomic Testing
 P.O. Box 610, Brantford, Ontario
 N3T 5R4