

## **APPLICATION FOR DNA TESTING**

## Horse's Details

Name:	D.O.B:	
Colour:	Sex:	
ACE Life No:	Height if not a foal:	
Microchip:	Another Reg:	
Sire:	Sire Reg No:	
Dam:	Dam Reg No:	

## **Owner's Details**

Name:	Stud Name:	
Address:		P/code:
Postal Address:		P/code:
Phone		
Email		
Breeders Name:		

**Reason for test:** 
□ Parental test

- □ Warmblood Fragile Foal Test for mares (Extra \$45)
- □ Colour test please specify (Extra \$45).....

## Details from the Person taking the DNA sample:

Name:	Date Sample Taken:
Address:	Contact No:

I, \_\_\_\_\_\_\_\_ (full name of applicant) hereby confirm that the information I have supplied on this application above, to my knowledge is true and correct. I acknowledge that the ownership of the DNA hair samples after dispatch rests with the ACE Group Inc. and that the ACE Group Inc. may use these DNA samples and profiles for such purposes as it sees fit.

Please forward this form completed along with the DNA Sample: To: **ACE Group Inc., PO Box 224, Canungra Qld 4275**.

Applicant's Signature: \_\_\_\_\_

\_Date: \_\_\_\_\_

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

I declare that I have witnessed the DNA sample being taken from the above-mentioned horse/foal.

Witness's Signature:

Date: \_\_\_\_\_

THE AUSTRALIAN CONTINENTAL EQUESTRIAN GROUP INC. ARBN: 610 022 065 / ABN: 67 826 873 846 PO Box 224, Canungra QLD 4275 <u>office@acegroupinc.com.au</u> www.acegroupinc.com.au