

DNA Hair Kit Order Form



American Paint Horse Association

P.O. Box 961023 • Fort Worth, Texas 76161
(817) 834-APHA (2742) • Fax (817) 834-3152
2800 Meacham Boulevard, Fort Worth, Texas 76137
www.apha.com • askapha@apha.com

For Office Use Only

Date Received _____

W.O. # _____

Charge CCD _____

Initials _____

DNA Facts and Tips

Be sure to include each horse's name and registration number as well as the appropriate fee. It is not required that you use this form when ordering a kit. However, if you do not use this form, be certain that all of the pertinent information is included.

Mane hair is normally used to derive DNA. However, if a foal is being tested, it is necessary to pull **tail** hair as the roots of a foal's mane hair are too small.

Horses required to have a DNA genetic type on file include all breeding stallions (Paint, Quarter Horse and Thoroughbred), mares bred using cooled transported/frozen semen, dams of horses intended to race and donor mares in the embryo transfer, vitrified embryo or oocyte program. Horses required to have parentage verification include the resulting foal from the above breeding methods, all cropout horses, and all race horses foaled on or after January 1, 2000.

When ordering DNA Hair Kits, please keep in mind that normal processing time for a parentage verification is from 2 to 4 weeks after the sire, dam and subject horse have a genetic type on file at the laboratory.

In the event of the death of a parent or it's unavailability, the option of forensic or derivation testing is available. Please call for more details.

Results for coat color and disease diagnostic testing will be part of the horse's APHA record and may be printed on the original certificate of registration.

If you have a Quarter Horse (stallion or mare) that has already been genetically tested through AQHA, we will accept those test results. Please send a copy of the testing verification that you have received from AQHA containing the horse's name, micro-satellite markers and lab case number.

If you have a Thoroughbred (stallion or mare) with a blood type on file with the Jockey Club we will accept those results. It will be necessary that you send us a written authorization to obtain that information directly from the Jockey Club.

DNA hair kits may be ordered over the telephone if you wish to pay by Visa, MasterCard or American Express.

If you need additional information, call MemberCare at (817) 222-6423.

Registered Name of Horse

APHA Registration Number

Owner's APHA ID Number: _____

Daytime Telephone Number: _____

Address for Mailing of DNA Hair Kit(s):

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Fee Schedule — Please indicate which package you wish to order.

- Please check here if you need **parentage verification** for racing, embryo transfer, cooled shipped/frozen semen or cropout foals. (If the horse is unregistered the Registration Application must accompany this form.)
- DNA genetic typing fee — \$60
(required for breeding stallions and parentage verification cases)
- Comprehensive Disease Diagnostic test — \$100
(test for the presence of HERDA, HYPP, GBED, and OLWS)
- Individual Disease Diagnostic Tests — \$50 per test per horse
Indicate test(s) requested: _____
- Comprehensive Coat Color test — \$110
(test for the presence of red factor, agouti, cream, pearl, champagne, dun, silver, gray, tobiano, OLWS, Sabino 1)
- Individual Coat Color tests
Red factor and Agouti (combined) — \$40 per horse
All other individual tests — \$25 per test per horse
Indicate test(s) requested: _____

Each fee covers the cost of the kit as well as the laboratory and recording fees. If you wish to have a copy of the DNA test results sent to another organization, please include a written request, signed by the horse's owner of record or authorized agent. For additional information concerning DNA testing requirements, please see the left side of this form.

If paying by credit card, please provide the following.

Visa MasterCard American Express

Card Holder's Name: _____

Card Number: _____ CVV#: _____

Expiration Date: _____ Daytime Phone Number: _____

Card Holder's Signature: _____

Requests for DNA Hair Kits should be mailed to:

AMERICAN PAINT HORSE ASSOCIATION
Field Services
P.O. Box 961023
Fort Worth, Texas 76161-0023