



## Request for Genetic Testing or Parentage

Send DNA Samples, Form and Payment to:

SGBI  
P.O. Box 1257  
Kingsville, TX. 78364

REGISTRATION #	FULL PANEL TEST Verify Parentage: YES/NO (attach list of sire/dam) List Sample Barcode		PARENTAGE ONLY TEST *Indicate possible sires List Sample Barcode	
		\$50		\$20
		\$50		\$20
		\$50		\$20
		\$50		\$20
		\$50		\$20
		\$50		\$20
		\$50		\$20
		\$50		\$20
		\$50		\$20
		\$50		\$20

Total \$ \_\_\_\_\_

\*Parentage: Must list possible sire(s)

1) Reg#: \_\_\_\_\_

2) Reg#: \_\_\_\_\_

Payment in full is required for processing:

Check No. \_\_\_\_\_ for \$ \_\_\_\_\_ is enclosed.

Visa/MC # \_\_\_\_\_ Ex: \_\_\_\_\_/\_\_\_\_\_

Check here if you wish to be on our permanent credit card file.

Member signature \_\_\_\_\_ Herd# \_\_\_\_\_ Date \_\_\_\_\_

**\*\*THIS FORM MUST ACCOMPANY SAMPLES\*\***