



Gene Control

An Organisation of Bavarian Animal Breeding Associations

Equine sample submission form

Coat colors	Genetic diseases
Red factor (RFP)	SCID (SD)
Agouti (AG)	HYPP (HY)
Tobiano (TO)	Lethal white overo (LWO)
Cream Dilution (CR)	Cerebelar Abiotrophy (CA)
Silver Dapple (SIL)	Lavender foal syndrome (LFS)
Grey* (G)	HERDA (HRD)
Splashed White (SPL)	Junctional epidermolysis bullosa (JEB)

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*This test does not discriminate between homo- and heterozygous grey horses.

Breeding Organisation (where applicable)

All pedigree data and animal IDs specified in this application correspond to appropriate entries of the breed registry.

Date, stamp and signature

Address for invoice

Please indicate phone, fax or email in case of further queries

Legally binding signature

Address of the Owner

Sampling

I confirm that all submitted samples are labelled correctly and originate from the animals specified in this application.

Date, signature of the sampler, if applicable: Stamp

Animal 1

Reg. No.:	<input type="text"/>	Date of birth:	<input type="text"/>
Name:	<input type="text"/>	Breed:	<input type="text"/>
Requested analysis:		<input type="text"/>	

Please refer to the table above on the left

Animal 2

Reg. No.:	<input type="text"/>	Date of birth:	<input type="text"/>
Name:	<input type="text"/>	Breed:	<input type="text"/>
Requested analysis:		<input type="text"/>	

Please refer to the table above on the left

Animal 3

Reg. No.:	<input type="text"/>	Date of birth:	<input type="text"/>
Name:	<input type="text"/>	Breed:	<input type="text"/>
Requested analysis:		<input type="text"/>	

Please refer to the table above on the left

Animal 4

Reg. No.:	<input type="text"/>	Date of birth:	<input type="text"/>
Name:	<input type="text"/>	Breed:	<input type="text"/>
Requested analysis:		<input type="text"/>	

Please refer to the table above on the left

Remarks: