

Submission form

Genetics

LABOKLIN

LABOR FÜR KLINISCHE DIAGNOSTIK GMBH & CO. KG

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Customer-No. / Barcode

1 8 5 0 0 0

Business hours: Mon - Fri: 9:00 - 18:00, Sat: 9:00 - 13:00

Breeding Club:

**Vereniging De
Weimarse Staande
Hond (WSH)**

· Dieze 85
· 5061 NW Oisterwijk
· The Netherlands
· E-Mail: voorzitter@weimaraners.nl

Results to Club via:

Email

Invoice to:

Owner

(If the invoice should be sent to the owner or submitter, please include their complete address and signature)

Animal: Dog

Courier

I have checked the identity of the animal(s) and confirm that the samples were taken from the animal(s) listed below.

Veterinarian's name: _____

Signature / Stamp veterinarian _____

Patient-ID: _____

Date of sampling: _____

Owner:
(Block letters only, please!)

Customer-No. Owner

Name: _____

Results to owner via:

First name: _____

Email

Date of birth: _____

Postal mail (with costs)

Street: _____

Your personal data will be used to process your order according to our terms for the use of data.

You can find these terms as well as information on your rights at <http://laboklin.com/dataprotection>.

Zipcode/city: _____

With my signature, I agree to pay the costs for the laboratory testing.

Country: _____

Fax / Email: _____

Tel.-No.: _____

(Owners signature)



By using this form, both the veterinarian (breed warden) as well as the dog owner agree that the WSH acts as the client. As such, the WSH thus receives a copy of the findings and corresponding rights to this sample submission. Any subsequent orders (reorders) can therefore also be commissioned by the WSH. Only then can the conditions agreed between LABOKLIN and the WSH be granted.

Information certificate:

- Certificates are charged separately. A digital certificate (PDF) is issued for each report at a separate charge.
- The sample must be collected by a veterinarian or authorized person.
- The identity of the animal must be specified by Microchip-No., Tattoo-No. and/or Pedigree-No.

Newsletter:

Register for our "Genetic News" as well, to receive information about recent genetic developments and health issues:
<https://shop.labogen.com/en/newsletter/>

Further requests or comments: _____

General terms and business conditions:

Please find a complete list of our tests and prices in our most recent catalogue or online under www.labogen.com/en/submission-forms
Services offered and prices may be subject to change / Samples and anonymised test results can be used for scientific purposes /
Please find our complete general terms and conditions of business under www.laboklin.com

INT - 022020032 / 2402

Please note: Please note: Information on breed and test name or lab number is mandatory!

Animal 1 (previous result number, if known: _____)
(Please complete using capital letters)

Sample: 0.5 ml EDTA blood buccal swab

Sex: f m

Animal name: _____

Date of birth: _____

Breed: _____

Coat colour: _____

Pedigree-No.: _____

Tattoo-No.: _____

Microchip-No.: _____

Sample label: _____

Desired test(s) for animal 1 can be marked here:

Price:

8690 Paroxysmal Exercise-Induced Dyskinesia (PED)

48,00 €

Further tests for animal 1 (see catalogue or www.labogen.com/en/submission-forms)

Test number	Test name (abbreviation)
_____	_____
_____	_____

+ ⁸⁷⁹¹ Digital certificate (see info on page 1)

Animal 2 (previous result number, if known: _____)
(Please complete using capital letters)

Sample: 0.5 ml EDTA blood buccal swab

Sex: f m

Animal name: _____

Date of birth: _____

Breed: _____

Coat colour: _____

Pedigree-No.: _____

Tattoo-No.: _____

Microchip-No.: _____

Sample label: _____

Desired test(s) for animal 2 can be marked here:

Price:

8690 Paroxysmal Exercise-Induced Dyskinesia (PED)

48,00 €

further tests for animal 2 (see catalogue or www.labogen.com/en/submission-forms)

Test number	Test name (abbreviation)
_____	_____
_____	_____

+ ⁸⁷⁹¹ Digital certificate (see info on page 1)

Animal 3 (previous result number, if known: _____)
(Please complete using capital letters)

Sample: 0.5 ml EDTA blood buccal swab

Sex: f m

Animal name: _____

Date of birth: _____

Breed: _____

Coat colour: _____

Pedigree-No.: _____

Tattoo-No.: _____

Microchip-No.: _____

Sample label: _____

Desired test(s) for animal 3 can be marked here:

Price:

8690 Paroxysmal Exercise-Induced Dyskinesia (PED)

48,00 €

further tests for animal 3 (see catalogue or www.labogen.com/en/submission-forms)

Test number	Test name (abbreviation)
_____	_____
_____	_____

+ ⁸⁷⁹¹ Digital certificate (see info on page 1)