

HAIR COLLECTION FOR DNA ANALYSIS

Procedures for collection and mailing of hair samples for DNA testing:
 Hair from the mane or tail must be freshly pulled so that the root bulb remains attached to the hair shaft. It is the root bulb that contains the DNA and not the shaft. A minimum of 15 root bulbs are required.
 Tape the hairs on the DNA typing request form (below) with clear plastic tape. DO NOT tape over the root bulbs. Cut the hair shaft so that the hairs are no longer than 3 inches in length. Fold the form with the attached hair samples so that the hair is on the inside and mail to the lab as soon as possible.

FORWARD SAMPLE & \$32.00
 CHECK MADE PAYABLE TO
 UNIVERSITY OF KENTUCKY

LAB:

University Of KY
 Animal Genetic Testing & Research Lab
 108 Gluck Equine Research Center
 Lexington, KY 40546-0099
 (859) 257-4757

OWNER OR PERSON SUBMITTING HAIR SAMPLE

Name:
 Farm:
 Address:
 Phone:

REGISTRY:
 American Shetland Pony Club
 American Miniature Horse Registry
 American Show Pony Registry
 National Show Pony Registry
 81-B E. Queenwood
 Morton, IL 61550

REGISTRATION #'s NEEDED or write pending if not registered with AMHR or ASPC

| HORSE SAMPLED | | | | | PARENTS OF HORSE SAMPLED | |
|---------------|---------------|-----|-----|-------|--------------------------|---------------|
| REG. | NAME OF HORSE | DOB | SEX | COLOR | S/D | NAME OF HORSE |
| | | | | | SIRE | |
| | | | | | REG# | |
| | | | | | DAM | |
| | | | | | REG# | |

UNIVERSITY OF KENTUCKY – PLEASE VERIFY PARENTAGE OF FOAL/HORSE

Certificate of Identification
 I hereby certify the identity of the horse(s) listed above as Being the same horse(s) registered and recorded in the American Shetland Pony Club or American Miniature Horse Registry or pending registration for entry in those books.

Certified Release
 I hereby release the University of Kentucky Veterinary Science Department and its representatives from any and all claims of injury, death or damage to the horse(s) listed above, handler and/or property, by reason of the extraction of hair samples.

 Signature of recorded owner or agent Date

 Signature of recorded owner or agent Date

 Signature of person taking hair sample(s) Date

.....TAPE HAIR SAMPLES BELOW.....

___ Parent Qualify

___ Do Not Parent Qualify

