

REQUEST FOR DNA MARKERS (ONLY)

If Animal is not registered, it MUST be recorded with the TLBAA Registration Office

Name:	<u></u> .	Membership #
Address:		
Phone:		Email:
Name ar	ıd Registration Num	ber of Animal to be DNA TESTED:
Name:		Registration #
Male: Female: Dat	e of Birth:	Private Herd Number:
Color:		
☐ SNP ☐ STR Barcode II	D:	Sample Type: Hair 🗌 Blood 🔲 Tissue Sample
BARCOD	E ID NUMBERS LOCATE	ED ON INDIVIDUAL SAMPLE CONTAINER
		ber of Animal to be DNA TESTED:
Name:		Registration #
Male: Female: Dat	e of Birth:	Private Herd Number:
Color:		
SNP STR Barcode I	D:	Sample Type: Hair Blood Tissue Sample
		MBERS LOCATED ON INDIV MPLE CONTAINER
<u>Name ar</u>	nd Registration Num	ber of Animal to be DNA TESTED:
Name:		Registration #
Male: Female: Dat	e of Birth:	Private Herd Number:
Color:		
SNP STR Barcode I		Sample Type Hair Blood Tissue Sample
BARCOD	'E ID NUMBERS LOCATE	ED ON INDIVIDUAL SAMPLE CONTAINER
Return this form to:		\$4 FEE ON ALL HAIR SAMPLES
TLBAA PO BOX 4430	Testing Samples MUST be sent to Neogen with an ORDER NUMBER	
Fort Worth, TX 76164 provided by the		he TLBAA Office. Samples sent in without an order number entified properly and may result in increased wait time.
OFFICE : (817) 625-6241 amelia@tlbaa.org or rick@tlbaa.org	•	enance property and may result in increased wait time.
		

TEST SAMPLES MUST BE MAILED TO NEOGEN. DO NOT SEND TEST SAMPLES TO TIRAA





ALL TESTING SAMPLE SUPPLIES MUST BE PURCHASED THROUH WWW IGENITY COM