



SAMPLE INFORMATION for BCMS Parentage Verification

Complete both sides of this form and send it with payment and sample collectors to the freepost address stated.

IMPORTANT NOTE: It is essential that samples are taken in accordance with instructions provided and that the procedure is carried out by a licensed Vet. If blood samples are being submitted ensure purple (EDTA) tubes are used

CONTACT INFORMATION FOR BCMS CERTIFICATE

Farm/Organisation:			Breed Code	Sex (M/F)	
Customer Name:					
Address:		Town/City:			Postcode:
Telephone:	Mobile:	Email:			
	Animal I.D. Number or Reg No.	Hair Collector Barcode No.			
CALF					
DAM					
CALF					
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Freepost RSYR-XBKT-GSBJ, Neogen Europe Ltd. Attn Igenity, The Dairy School, Auchincruive, Ayr, KA6 5HU

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IMPORTANT INFORMATION

Samples cannot be processed if payment is not included and/or request forms are not signed.

It is essential that samples are taken in accordance with instructions provided and that the procedure is carried out by a licensed vet.

If blood samples are being submitted ensure purple (EDTA) tubes are used.

BILLING INFORMATION

Please print in block capitals

Contact Name (FOR BILLING): _____

Farm/Organisation: _____

Address: _____

Town/City: _____ Postcode: _____

Telephone: _____

Fax: _____

Email: _____

Returning Results

Results are returned approx 3-4 weeks from receipt of sample(s)

NR Retest Policy: Please be aware when collecting samples, that we do accept resubmissions for any samples that fail testing (receive an NR score) but these samples will be retested at the full price of a new test. If you have questions about sample collection, please tel: 0845 603 8895 or e-mail igenity@neogeneurope.com

DECLARATION: I certify that the samples have been collected from the animals detailed, and that I have taken all reasonable care to ensure accuracy of the records. I accept that I am solely liable for any misuse, deliberate or accidental, of the test data. I accept that Neogen offers no warranty, expressed or implied, to vouch for the accuracy or truthfulness of any Customer's representations about tested or untested livestock to any third party.

Name: _____ Signature: _____ Date: _____

ORDER VALUE: Cost per sample £30 inc VAT

Total number of samples enclosed: Total cost of order (including VAT): £

PAYMENT METHOD

Cheque Enclosed: (Please make cheque payable to Neogen Europe Ltd.)

Credit Card: Visa Mastercard Visa Debit

Card Number:

Start Date: Expiry Date: Security Code:

Name on card: _____

Billing address for card, **if different from billing information:** _____

Signature of card holder: _____

SAMPLE SUBMISSION

Complete both sides of this form and send it with payment and sample collectors in the FREEPOST envelope provided.