Owner Information:

Name:

Toll Free: 800-822-6740 Phone: 970-472-9951

Fax: 970-472-9956

Veterinarian Information (If applicable):

genecheck@genecheck.com

www.genecheck.com

COLLIE EYE ANOMALY (CEA) TEST SUBMISSION FORM

Name:

Ranch/Farm Name:	Practice Name:		
Mailing Address:	Mailing Address:		
City, State, Zip:	City, State, Zip:		
Phone 1:	Phone:		
Phone 2:	E-mail:		
E-mail:	Fax:		
Cost per Dog: \$55.00 *\$40.00 for NCA members	Payment Information:		
# of dog samples submittedx \$55 =	Check Enclosed \$US dollars Credit Cards accepted (circle one): Visa Mastercard Discover		
*National Cattledog Association Members # of dog samples submitted x \$40 =	Credit Card #		
Call the NCA office at 970-224-2437	Exp Date:/ 3 Digit Code (on back of card)		
or go to: www.nationalcattledog.com to learn more about becoming an NCA member.	Signature:		
Test results are typically completed within 3-5 busine e-mail (if available) or phone call. Test certifications are typically completed within 3-5 busine e-mail (if available) or phone call.	ess days. Results will be reported the day of completion by ficates are mailed out the day after test completion.		
Test results are typically completed within 3-5 business.			
Test results are typically completed within 3-5 busine-e-mail (if available) or phone call. Test certification:	ficates are mailed out the day after test completion.		
Test results are typically completed within 3-5 busing e-mail (if available) or phone call. Test certification: Breed:	ficates are mailed out the day after test completion. Call Name:		
Test results are typically completed within 3-5 busing e-mail (if available) or phone call. Test certification: Breed: Birthdate/(Month/Day/Year)	ficates are mailed out the day after test completion. Call Name:		
Test results are typically completed within 3-5 busing e-mail (if available) or phone call. Test certification: Breed: Birthdate/(Month/Day/Year) Registry:	Call Name: Sex:Male Female		
Test results are typically completed within 3-5 busing e-mail (if available) or phone call. Test certification: Breed: Birthdate/(Month/Day/Year) Registry: Reg. Name:	Call Name: Sex:MaleFemale Reg. Number:		
Test results are typically completed within 3-5 busing e-mail (if available) or phone call. Test certification: Breed: Birthdate/(Month/Day/Year) Registry: Reg. Name: Sire Reg. Name:	Call Name: Sex:MaleFemale Reg. Number: Sire Reg. Number:		
Test results are typically completed within 3-5 busing e-mail (if available) or phone call. Test certification: Breed: Birthdate/(Month/Day/Year) Registry: Reg. Name: Sire Reg. Name: Dam Reg. Name:	Call Name: Sex:MaleFemale Reg. Number: Sire Reg. Number: Dam Reg. Number:		
Test results are typically completed within 3-5 busine e-mail (if available) or phone call. Test certification: Breed: Birthdate/(Month/Day/Year) Registry: Reg. Name: Sire Reg. Name: Dam Reg. Name: Breed:	Call Name: Sex:MaleFemale Reg. Number: Sire Reg. Number: Dam Reg. Number: Call Name:		
Test results are typically completed within 3-5 busine e-mail (if available) or phone call. Test certification: Breed: Birthdate/(Month/Day/Year) Registry: Reg. Name: Sire Reg. Name: Dam Reg. Name: Breed: Birthdate/(Month/Day/Year)	Call Name: Sex:MaleFemale Reg. Number: Sire Reg. Number: Dam Reg. Number: Call Name:		
Test results are typically completed within 3-5 busing e-mail (if available) or phone call. Test certically completed within 3-5 busing e-mail (if available) or phone call. Test certically call to the complete distribution of the complete distribution of the complete distribution of the complete distribution of the call to the certical distribution of the certical distrib	Call Name: Sex:MaleFemale Reg. Number: Sire Reg. Number: Dam Reg. Number: Call Name: Sex:MaleFemale		

Dog Identification continued: (Collie Eye Anomaly– CEA)				
Owner Name:	Owner F	Phone #:	Note: Please fill out complete owner information on page 1.	
Breed:		Call Name:		
Birthdate/(M	onth/Day/Year)	Sex:Male1	Female	
Registry:				
Reg. Name:		Reg. Number:		
Sire Reg. Name:		Sire Reg. Number:		
Dam Reg. Name:		Dam Reg. Number:		
Breed:		Call Name:		
Birthdate/(M	onth/Day/Year)	Sex:Male1	Female	
Registry:		1		
Reg. Name:		Reg. Number:		
Sire Reg. Name:		Sire Reg. Number:		
Dam Reg. Name:		Dam Reg. Number:		
Breed:		Call Name:		
Birthdate/(M	onth/Day/Year)	Sex:Male1	Female	
Registry:				
Reg. Name:		Reg. Number:		
Sire Reg. Name:		Sire Reg. Number:		
Dam Reg. Name:		Dam Reg. Number:		
Breed:		Call Name:		
Birthdate/(M	onth/Day/Year)	Sex:Male1	Female	
Registry:				
Reg. Name:		Reg. Number:		
Sire Reg. Name:		Sire Reg. Number:		
Dam Reg. Name:		Dam Reg. Number:		
Breed:		Call Name:		
Birthdate/(M	onth/Day/Year)	Sex:Male1	Female	
Registry:		•		
Reg. Name:		Reg. Number:		
Sire Reg. Name:		Sire Reg. Number:		
Dam Reg. Name:		Dam Reg. Number:		

^{**}All tests are performed by Gene Check, Inc using naturally occurring DNA sequences**