

This specimen request form **MUST** accompany each specimen/s.

OWNER INFORMATION		ACCOUNT TO		
ID number:		<b>Deposit (Please attached proof of payment)</b> Bank details: Standard Bank Branch Code: 055534 Account nr: 240333756 Account name: Certified Wagyu Beef Deposit reference: Owner Name / Account Nr  Seedstock (Stud): Both Dam and Sire to be verified CWB: Only sire to be verified		
Surname:				
Member number:				
Company:				
VAT nr:				
Address:				
Contact Person:				
E-Mail:				
Tel: (H): _____ (W): _____				
Cell:				
TEST No	TEST AVAILABLE (Additional R200 per sample for priority/urgent cases) <input type="checkbox"/> Please tick if required	PRICE/UNIT (Vat Excluded)	NO OF SPECIMEN	TOTAL
1	DNA profile (Includes parentage)	R164.00		
2	Chediak-Higashi Syndrome (CHS)	R120.00		
3	16 Claudin-Type 1 (CL16-1)	R120.00		
4	16 Claudin-Type 2 (CL16-2)	R120.00		
5	Factor X1 (F11)	R120.00		
6	Combination of Test No. 2, 3, 4, 5.	R404.00		
7	Growth Hormone (GH exon 5)	R359.00		
8	Stearoyl-CoA Desaturase (SCD)	R359.00		
9	Combination of Test No. 7 and 8.	R657.00		
10	Combination of Test No. 2, 3, 4, 5, 7 and 8	R979.00		
11	50K Illumina Bovine Beadchip	R656.00		
12	50K Illumina Bovine Beadchip plus 2000 SNP Genetic Traits & Disorder assessment (Includes Polled, Coat colour and Myostatin status)	R866.00		
Postal Address: Postnet Suite 12 Private Bag X7003 Langenhovenpark Bloemfontein 9301			<b>TOTAL</b>	

Results to:  Society

Owner

I accept the instructions and terms stipulated and consent to the DNA data being recorded in the database of Wagyu SA.

Signature:

Date:

[Click here to enter a date.](#)