## Pony Of the Americas Club Inc.

## **Genetic Testing Request**

Pony/Horse Nam	ie:						
		Foaling Date:					
Mare:	Stalion:	Gelding:	POA	:	Other		
Sire/Breed/Reg #:				Dam/Breed/Reg	#:		
	If Other t	han POA a copy	of both side	s of Certificat	e of Registration i	s reauired.	
E-Mail Kit (Must I	•		_		,		
Name:		-					
Email :(required) _	mail :(required)Phone#:						
DNA:						\$40.00	
HYPP:						\$50.00	
Parent Verification:						\$40.00	
LP/PATN1: (Results Only)						\$45.00	
Disease Panel: (PSSM1, GBED, HERDA, HYPP, MH, MYHM)						\$90.00	
Appaloosa Panel: (LP, PATN1, RED FACTOR, AGOUTI, SPLASHED WHITE, DOMINATE WHITE)\$65.00							
	If submitting	for LP Certifica	tion - it requir	es Parent Ver	rification and LP te	esting.	
Total Enclosed						\$	
Payment: (Circle O	ne)	Check	Visa	AmEx	Discover	Master Card	
Card Number:				Exp Date:	<u>S</u>	Security Code:	
Name on Card:							
Billing Address:				City:	9	State:Zip:	
Authorized Signatu	ıre.						

Return this completed form and payment to

Pony Of the Americas Club, Inc. 3828 S. Emerson Ave Indianapolis, IN 46203