Addendum 12f

**Suffolk Horse Blood Sample Record Sheet**

**Sample Type Required: EDTA Sample Size: 6 to 10ml**

**All Blood samples must be sent by the vet to Weatherbys in a blood sampling protective pot.**

**Suffolk Horse Society Fulfilment,**

**Weatherbys,**

**Sanders Road,**

**Wellingborough,**

**Northamptonshire, NN8 4BX**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Foal Details** | | | | |
| Foal name |  | | Foal Date of Birth |  |
| Foal Microchip No: |  | | | |
| **Parentage Details** | | | | |
| Sire Name |  | | Sire Reg No |  |
| Dam Name |  | | Dam Reg No |  |
| **Owner Details** | | | | |
| Owner Name: |  | | Telephone No |  |
| Address |  | | What is the Blood Sample for?  Repeat Bloods / Stallion Licence / Parentage Testing | |
| Postcode |  | | Date Sample Taken |  |
| Owners Signature |  | | Vets Signature |  |
| **Weatherbys to complete** | | | | |
| Sire Sample on File: Yes / No | | | Dam Sample on File : Yes / No | |
| Date Sample Received at Weatherbys | | | Date form returned to Suffolk Horse Society | |
| **Suffolk Horse Society to complete** | | | | |
| Date Form Received | |  | Further Action Required?  Yes / No | |
| Any other comments from Suffolk Horse Society | | | | |

**Please DNA test against the Sire and the Mare of the Suffolk Horse / Foal – If any problems please contact the Suffolk Horse Society at Info@suffolkhorsesociety.org.uk**