

GRANDPARENT TESTING APPLICATION (Curiosity)

To initiate a DNA test, please complete this form and fax or mail to Orchid Cellmark.

Referred by:

PARTIES TO BE TESTED		Orchid Case #
M O T H E R	Name	To Receive Test Results? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Address	Date of Birth
	City/State/Zip	
	Phone #	
C H I L D	Name	To Receive Test Results? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Address	Date of Birth
	City/State/Zip	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
	Phone #	
G R A N D M O T H E R	Name	To Receive Test Results? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Address	Date of Birth
	City/State/Zip	
	Phone #	
G R A N D F A T H E R	Name	To Receive Test Results? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Address	Date of Birth
	City/State/Zip	
	Phone #	

CHEEK SWAB KIT DISTRIBUTION

All cheek swab kits are sent to clients by Priority Mail. Shipment to a single address is covered by the regular testing fee. Each additional shipment is \$25/address. If you prefer kits to be shipped to you by courier, a surcharge will apply. In the table below, please indicate where kits are to be sent and the preferred method of shipment. Please note that we provide you with a pre-paid courier waybill and packaging for the shipment of samples to our laboratory.

Cheek Swab Kit Distribution	Via Priority Mail	Via Courier (must provide street address)
<input type="checkbox"/> All kits to one client's address. Please specify which client:	<input type="checkbox"/> Free	<input type="checkbox"/> \$25 surcharge
<input type="checkbox"/> A separate kit to each individual above (1st address is free)	<input type="checkbox"/> \$25/add'l address	<input type="checkbox"/> \$25/shipment

PAYMENT INFORMATION

- * The price for testing mother, child and one paternal grandparent is \$675. Each additional grandparent tested at the same time is an additional \$125.
- * The price to test a new person at a later date is \$125 plus \$100 for each sample that is re-used. Samples are stored for one year only.
- * Non-cheek swab samples submitted for testing are subject to a \$225 non-refundable surcharge.
- * Minimum non-refundable deposit of \$100 is required prior to sending out specimen collection kits.
- * Cases are fully non-refundable after 6 months.

\$ _____ is included (money order, cashier's or attorney's check accepted)

\$ _____ may be charged to the following credit card: Visa / MasterCard / Discover / American Express

Card #: _____ Exp: _____ 3 Digit Authorization Code: _____

Name of Card Holder: _____ Cardholder Signature: _____

Address of Cardholder if different than person receiving results (we will mail credit card receipt to cardholder):

INTERNET