

## Y-STR DNA TESTING APPLICATION

To initiate a Y-STR test to determine patrilineage, please complete this form and fax or mail to Orchid Cellmark.  
Please note that all tested parties should be male.  
All results will be sent by US Mail to parties indicated on this form.

PARTIES TO BE TESTED		Orchid Cellmark Case #
C L I E N T	Name	To Receive Test Results? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Address	Date of Birth
	City/State/Zip	
	Daytime Phone # <span style="float: right;">Evening Phone #</span>	
C L I E N T	Name	To Receive Test Results? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Address	Date of Birth
	City/State/Zip	
	Daytime Phone # <span style="float: right;">Evening Phone #</span>	
C L I E N T	Name	To Receive Test Results? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Address	Date of Birth
	City/State/Zip	
	Daytime Phone # <span style="float: right;">Evening Phone #</span>	

### SCHEDULING INFORMATION

Please indicate scheduling preferences in the space below.

All parties together     Each party separately     Other arrangement. Please specify.

### RESULTS DISTRIBUTION

If another party, other than a tested party, should be receiving results, please indicate their full contact information below:

Name

Address

City/State/Zip

Daytime Phone #

Evening Phone #

### PAYMENT INFORMATION

\* The price for a Y-STR DNA test is \$350/person

\* Deposit of \$100 is required prior to scheduling of appointments.

\* If this case is cancelled at any time prior to testing, there will be a \$100 non-refundable administration fee. Cases are non-refundable after 6 mos.

\$ \_\_\_\_\_ is included (Money order, Cashier's or Attorney's check accepted. Please make payable to Orchid Cellmark)

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

Card #: \_\_\_\_\_ Expiration: \_\_\_\_\_ 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):**

\_\_\_\_\_