



APPLICATION FOR DNA TESTING - Genotype (Family Law Court Admissible)

Client's Name

Date of Birth

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Address

Phone (Business Hrs)

Client's General Practitioner

Name

Address

Phone

PAYMENT ADVICE

Who is paying for the test?

Method of payment

- Cheque Money Order VISA Card
 Bank Card Master Card

For credit card payment please complete the following:

Card No.

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Expiry Date

Amount

Name of Cardholder

Signature

Date

SCHEDULE OF FEES

Single Genotype **\$220**

NB. \$220 per person

TOTAL