

**DNA NEWFOUNDLAND STUD**  
**INDIVIDUAL IDENTIFICATION FORM**  
*(Please Xerox as many sheets as needed)*

The horse listed below belongs to: \_\_\_\_\_  
Owner's Name \_\_\_\_\_ phone or e-mail \_\_\_\_\_

\_\_\_\_\_  
Address

SAMPLE # \_\_\_\_\_ BREED: \_\_\_\_\_

I do not wish to share individual data except with Dr. Cothran

I wish individual data to be shared with: \_\_\_\_\_

OWNERS SIGNATURE: \_\_\_\_\_

\_\_\_\_\_  
Horse's Registered Name \_\_\_\_\_ Registration # \_\_\_\_\_ Born \_\_\_\_\_ Sex \_\_\_\_\_

Sire: \_\_\_\_\_ Reg # \_\_\_\_\_

Dam: \_\_\_\_\_ Reg# \_\_\_\_\_

**TAPE HAIR SAMPLE HERE**  
DO NOT PLACE TAPE ON ROOTS

**OR**

**ENVELOPE CONTAINING HAIR**