

**APPLICATION FOR RESULTS OF DNA TESTING TO BE RECORDED IN CQI REGISTER**

For DNA results to be acceptable for CQI records the following process must be followed:

1. Cat must be microchipped.
2. Swab sample must be taken and submitted by a Veterinarian OR Registered Collection Agent - (this could be done at time of Microchipping. Microchip must be scanned at time of taking swab.)
3. Results Certificate to be included with this Application.
4. Original Registration Certificate with Fee of \$10.00 to be included with Application.

***Details of Cat being tested.***

Name: \_\_\_\_\_ Microchip # \_\_\_\_\_  
 Registration # \_\_\_\_\_ Registering Body \_\_\_\_\_  
 Breed \_\_\_\_\_ DOB \_\_\_\_\_  
 Colour \_\_\_\_\_ Sex \_\_\_\_\_

***Details of requested test (Please specify and/or tick)***

PKD Disease	<input type="checkbox"/>	Agouti (Colour)	<input type="checkbox"/>	Chocolate Cinnamon	<input type="checkbox"/>	Points (Coloration)	<input type="checkbox"/>
Dilute (Colour)	<input type="checkbox"/>	DNA Profile	<input type="checkbox"/>	Parentage Verification	<input type="checkbox"/>	HCM	<input type="checkbox"/>
Longhair	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>

***Details of Owner***

Name \_\_\_\_\_ CQI Member # \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
 \_\_\_\_\_ Postcode \_\_\_\_\_  
 Email address \_\_\_\_\_

Declaration by Owner: ***I declare all information on this application to be true and correct.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***Details of Veterinarian or Registered Collection Agent***

Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
 \_\_\_\_\_ Postcode \_\_\_\_\_  
 Email address \_\_\_\_\_

Declaration by Veterinarian: ***I declare all information on/with this application to be true and correct.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**This Application together with the prescribed fee is to be forwarded to:**

<b>Secretary</b> <b>Cats Queensland</b> <b>PO Box 3201</b> <b>Browns Plains Qld 4118</b> Ph: 07 4659 5877 Time: 9am – 6pm <b>only</b> email: <a href="mailto:catsqueensland@gmail.com">catsqueensland@gmail.com</a>	<b>DIRECT DEPOSIT DETAILS</b> A/C Name: CATS QLD INC BSB: 638 070 A/C Number: 11748710 REFERENCE Your surname & DNA Regn
	<b>Office use only:</b> <div style="background-color: #cccccc; height: 40px;"></div>