

Application for DNA Testing: Parentage (At Home)



Complete the application form and return to Identilab:

**PO Box 419
Salisbury QLD 4107**

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Fax: +61 7 3088 5507

Please call us on 1300 114 294 if you need assistance with this form.

Testing required	
<input type="checkbox"/> \$195 – Paternity (father) testing	<input type="checkbox"/> \$195 – Maternity (mother) testing
<input type="checkbox"/> \$165 – Additional person to be tested, e.g., 2 nd child or 2 nd father (x)	
Express testing	
<input type="checkbox"/> \$195 – Results available within 2 business days of samples arriving at laboratory	
Postage	
Send ALL collection kits to one address:	Send collection kits to TWO separate addresses:
<input type="checkbox"/> \$7.50 – standard trackable post in both directions	<input type="checkbox"/> \$37.50 – standard trackable post in both directions
<input type="checkbox"/> \$20 – Express Post to you and standard trackable post return to us	<input type="checkbox"/> \$50 – Express Post to you and standard trackable post return to us
<input type="checkbox"/> \$35 – Express Post in both directions	<input type="checkbox"/> \$65 – Express Post in both directions

TOTAL \$

Payment Options	
Credit/debit card	<input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Other Card no: CVV: Expiry: Name on card: Amount: \$ Signature:
	Zip – Zip now, pay later PayPal and PayPal Pay Later
After your order has been processed, you will be sent an email containing a secure payment link. Collection kits won't be sent until payment is made.	

Father (if to be tested)		Mother (if to be tested)	
Name:		Name:	
Address:		Address:	
Send kit(s) here <input type="checkbox"/>		Send kit(s) here <input type="checkbox"/>	
Phone:		Phone:	
Email:		Email:	
Child 1		Child 2	
Name:		Name:	
Age:	<input type="checkbox"/> Under 18 years <input type="checkbox"/> Over 18 years	Age:	<input type="checkbox"/> Under 18 years <input type="checkbox"/> Over 18 years
Address:		Address:	
Same as father <input type="checkbox"/> Same as mother <input type="checkbox"/>		Same as father <input type="checkbox"/> Same as mother <input type="checkbox"/>	
Phone:		Phone:	
Email:		Email:	