



## ACCREDITED PARENTAGE TEST - ADDITIONAL DONOR

**Please complete and return 1 additional donor form per extra person to be tested**

**Please return to us with the Parentage Order Form by email [sales@dadcheckgold.com](mailto:sales@dadcheckgold.com) or we are happy to take the order by telephone on 0191 543 6334**

Date sent to dadcheck®gold:

Are you:            A legal firm / Local Authority  
                          A member of the public

## **Section 1.0    Ordering Party Information**

Ordering Party Contact Name:

Firm/Local Authority (if applicable):

Could a close relative\* of the tested alleged parent, be the father/mother of the tested child/ren?  
For example; their sibling or own parent

Yes                      No

## **Section 2.0    Additional Donor Details**

Full name:

Date of Birth:

Sex (M/F):

Presumed Relationship:

### **Sample Collection Arrangements**

**2.1** Do you require a UK dadcheck®gold sample collection?

Yes                                      No

For UK dadcheck®gold sample collections please provide the name and contact information for the person with whom we should arrange this:

Full Name and Organisation (if applicable):

Telephone and/or e-mail:

Relationship to the child:

**2.2** Do you require an overseas sample collection?

Yes                                      Country

If yes, we shall contact you regarding this

No

### **Complete if children are under 16 years old:**

Name of person with Parental Responsibility:

Relationship to the child\*

\*e.g. mother, Local Authority, specified other. The person with Parental Responsibility must be able to give appropriate qualifying consent to the DNA test within the meaning of the Human Tissue Act 2004

Legal Bodies only - Is an Interim Care Order in place? If so, please add reference