

Blood Sample Release Form

Research Statement:

We would like to obtain a blood sample from your dog. The sample will help us to explore canine genetic issues including patterns of genetic diversity between and within breeds, and in disease states.

What are the risks Involved with a blood sample?

A blood draw may cause a slight momentary discomfort to your dog as the needle is inserted. There is a small possibility that some bruising might be seen around the draw site. This should cause your dog only marginal, short-term discomfort and not have any major consequences. If your dog becomes aggressive and/or bites during the blood sampling process, the Canine Genome Project and the Broad Institute are not liable in any way for any resultant physical harm or property damage. Compensation is not available in the unlikely event of physical harm to your dog resulting from the blood draw procedure.

Who will have Access to the Information and Specimen?

No information about you, or the identity and health information of your dog will be made available to the public. Only the Broad Institute and collaborators on the respective studies will have access to the samples. Any studies utilizing your dog's oral/blood tissue sample will occur with the understanding that none of your dog's unique identifiers (name, AKC number, etc.) will be distributed or published.

Dog Owner's Statement:

I have read the information provided above and have had an opportunity to ask questions regarding the procedures involved. I am the owner or the agent for the owner of the dog described below and I have the authority to execute this release. My signature below indicates I voluntarily agree to give my dog's oral tissue or blood specimen for this study.

Owner's Signature: _____ Date: _____

Owner's Name (printed): _____

Email Address: _____

Would you like to be notified of updates via email? Yes ___ No ___

Phone Number: _____

Street Address: _____

City, State, Zip: _____

Dog's Registered Name: _____

Dog's Call Name: _____ Dog Breed: _____

Registration Organization and number: _____

Variety/Coat Color: _____

Dog Gender: Male ___ Male(Neu) ___ Female ___ Female(Sp)___ Year of Sp/Neu _____

Pedigree enclosed: ___ yes ___ no Birth Year or Age: _____

Any known diseases in this dog: _____

Related dogs: _____

Please send sample to:

Dog Genome Project

Broad Institute Fax: 617-252-1902 (let us know to expect the sample)

One Kendall Square, Bldg 300 Email: dog-info@broad.mit.edu

Cambridge, MA 02139 Website: <http://www.broad.mit.edu/mammals/dog/>