

ParaSite Diagnostic Services

Factory 1, 3 Bray Street
HASTINGS VIC 3915

Ph: 03 5979 3101
Fx: 03 5979 4499
ABN: 84 506 278 331

Email: parasite1@iinet.net.au



OWNER DETAILS

NAME: PH:

ADDRESS: FAX:

..... EMAIL:

WORM-CHECK Test for Horses:

Date sample(s) COLLECTED:...../...../.....

Sample number					
Name of Animal					
Age/Class:					
Colic (yes / no)					
Last Drenched: Date					
Drench used					

Results are sent by email. Please give details if you need an alternative.

Do you require a larval culture? YES NO

If yes specify at what epg
(note: only recommended when epg is over 300.)

Do you need mailing kits? YES NO

Is this sample an export fluke test for Western Australia? ? YES (please circle)
If yes, then please complete an export liver fluke form and do not submit using this form.

The price list is available on www.parasite.com.au
Prepay using EFT to BSB 083 253 Account 8537 67430 or send a cheque with the samples or complete the credit card details on the back of this form.
Please note that it is cheaper to send payment with samples.

I am prepaying by: Credit card --- Cheque --- EFT OR Please send an invoice
Date paid by EFT: Prices are higher when we send an invoice

Express Post Samples Are Priority Processed
www.parasite.com.au

ParaSite Diagnostic Services Credit Card EQUINE

Factory 1, 3 Bray Street

HASTINGS VIC 3915

Ph: 03 5979 4374

Fx: 03 5979 4499

ABN: 84 506 278 331

Email: parasite1@iinet.net.au



Credit card authorization form
Send this in with your samples
The price list can be found on www.parasite.com.au

Name: _____

Phone number: _____

Date: _____

Credit Card type: VISA / MASTERCARD only

NUMBER: _____

Expiry date: ____ / ____

Dollar Value: \$

Name on the card: _____

COMMENTS:

Credit card details are not kept