



Print this document

This document contains the instructions to do the collection by yourself with cotton swabs that you may already have at home, or that you can easily obtain from a pharmacy (ex. Q-Tips). It also has the mailing instructions as well as the payment methods.



When done, send the samples along with the payment at:

**DNAForce Inc.
 1800 - 130 King St W
 Toronto (Ontario) M5X 2A2
 Canada**

Please note that all samples must be sent to this address. Although we have multiple collection centers in Canada, it is not possible to drop off the samples at these locations because everything must be received at this main address. Thank you for your understanding.

If you want to send samples other than mouth swabs, for example discrete samples or special samples such as (hair, toothbrush, etc.) please read Annex A at the end of this document.

List of prices for each test

Paternity, 1 father and 1 child	\$ 245 + tax
Maternity, 1 mother and 1 child	\$ 245 + tax
Siblingship test, 2 person	\$ 295 + tax
1 grandparent, aunt or uncle; 2 person	\$ 295 + tax
Twin test, 2 person	\$ 295 + tax
Add more people to any of the tests above	Add \$ 135 + tax more for each additional person
Special samples other than mouth swabs. Ex. Hair, toothbrush, kleenex, chewing gum, sperm, cigarette butts, clothing, etc.	See Annex A

PLEASE NOTE - WE DO NOT ACCEPT SPECIAL SAMPLES.

YOU MUST SEND SWABS

For example, we do not accept : Special samples other than mouth swabs. Ex. Hair, toothbrush, kleenex, chewing gum, sperm, cigarette butts, clothing, etc.

You must use mouth swabs when use this document.



Important: Do **not place the swabs in a plastic bag because the humidity buildup negatively affects DNA. If the swabs are already in a plastic bag, transfer them to a paper envelope instead. Thank you for your understanding.**

Instructions

Important:

Please read entire instruction sheet before beginning. Only collect one person's sample at a time.

Note:

In order to collect a proper sample it is important that the person has a clean mouth. Adults and children: Rinse mouth three times with warm water. Infants: Allow infant to drink room temperature water from a bottle before sampling. Alternatively, if the infant is not drinking water, wait at least three hours from feeding. Do not smoke/chew tobacco or use mouthwash or toothpaste 2 hours before sampling. Our laboratory must receive the sample no more than 60 days from the sampling.

Prepare to Sample

Gather the following items prior to sampling. Do not touch swab tips with your fingers.

- 4 sterile cotton-tipped swabs for each test participant (can be purchased at most pharmacies or drug stores). Q-Tips™ can be substituted, but is not the recommended method. If you use Q-Tips™, cut off one end so only one cotton-tipped end remains.
- 1 paper mail envelope per person tested.
- 1 mailing envelope, 6 X 9 inches or larger.
- Warm water for adults and children, room-temperature water in a baby bottle for infants.

PLEASE NOTE - WE DO NOT ACCEPT SPECIAL SAMPLES.

YOU MUST SEND SWABS

For example, we do not accept : Special samples other than mouth swabs. Ex. Hair, toothbrush, kleenex, chewing gum, sperm, cigarette butts, clothing, etc.

You must use mouth swabs when use this document.

Important: Do **not place the swabs in a plastic bag because the humidity buildup negatively affects DNA. If the swabs are already in a plastic bag, transfer them to a paper envelope instead. Thank you for your understanding.**

Obtain Samples - Step by Step

1. Rinse mouth three times with water (infants can simply drink water or alternatively keep the mouth clean for 30 minutes before the collection).
2. Label the paper envelopes for each test participant with the individual's name, race, biological sex and relationship with the group. Use one of the following only for race:
 - Caucasian
 - Asian
 - Hispanic
 - Unknown
 - African
 - Other (specify)

How to prepare the envelopes



Small envelopes for individual samples are recommended, with a larger envelope for the complete kit package including sample envelopes, completed forms and payment.

When samples are complete, you will place the small envelopes into a larger envelope for mailing.

You are now ready to begin the actual sample collection.

3. **DO NOT TOUCH THE TIP OF THE COTTON SWAB.** Collect sample by rolling the cotton swab firmly on the inside of each cheek 30 times (about 1 minute). Be certain to sample from the entire inner cheek surfaces.
4. Allow the swab to dry for 1 Hour. Place swab in the envelope labeled with the person's name.
5. Repeat steps 3 and 4 with the three other swabs.
6. Seal the envelope – the first person is finished! Sample the next person and so on, (Start from Step 3 for each additional person).
7. **IMPORTANT:** When you are finished, you should have 1 sealed envelope per person, each containing 4 swabs.
8. Complete the form in the next section and forward the samples to DNAForce inc, at the address indicated on page 1.



Select the type of DNA test

- | | | |
|--|---|---|
| <input type="checkbox"/> Paternity Test | <input type="checkbox"/> Grandparent Test | <input type="checkbox"/> Native indian DNA Test |
| <input type="checkbox"/> Maternity Test | <input type="checkbox"/> Avuncular Test (Uncle, Aunt) | <input type="checkbox"/> Ancestral Origins Test |
| <input type="checkbox"/> Brother/Sister Test | <input type="checkbox"/> Genetic predisposition test | <input type="checkbox"/> Other: _____ |

Primary contact person

Whom should we contact first if we require more information, or for other reasons? Only fill the sections where you are okay with us contacting you. Leave blank otherwise.

Tip: If you do not want to be contacted at your home address by mail, we suggest that you enter an alternative trusted address such as your work address or a friend's address.

Full Name

Phone 1

Phone 2 (optional)

Mail results to:

Street

City Province/State Postal/Zip code

Country Canada Other: _____

Email results to:

Email 1

Email 2 (optional)

I consent for all the participants to this test. Signature* of the consenting adult:

8. **ADULT SIGN HERE** → _____ 9. Date of signature / /

*Your signature constitutes agreement to the general terms and conditions and to the acknowledgement on the back of this page. The consenting adult is usually the person himself/herself if older than 18 years of age. However, for a minor, a person not legally responsible or a deceased person, it is their legal representative that must sign. I confirm that I have signed this form on the same day as the collection.



PLEASE READ THESE TERMS AND CONDITIONS CAREFULLY FOR IMPORTANT INFORMATION.

ACKNOWLEDGEMENT 1. I authorize DNAForce Inc. or its agents, suppliers and contractors to collect my specimens, or the specimens of the individual named on this form, necessary for the performance of the DNA test. 2. I understand that biological samples (blood, cheek cells, hair or skin) will be removed using standard techniques which carry very little risk. 3. There may be a possibility that the laboratory findings will be uninterpretable or of unknown significance. 4. I acknowledge and understand that if for any reason the biological specimen is inadequate for evaluation, DNAForce inc. (and each DNAForce Inc. partner) shall not be held liable if it is unable to produce test results due to insufficient specimen or due to the nature or condition of the specimen. DNAForce may request additional samples and the testing party may incur additional fees for specimen re-collection or re-testing. 5. I authorize DNAForce Inc. to provide a copy of the results of this test to any person submitting DNA samples for this test. 6. If this test involves a minor (under 18 years of age) or a person who is otherwise legally incapable of consenting, I represent and warrant that I have the legal authority to request and consent to, and will assume all legal responsibility for the collection of the specimen and for the authorization to perform DNA testing of said minor/person. I authorize DNAForce Inc. to provide the results to his or her legal guardian(s) or parent(s). 7. I verified that the information contained on this form is correct and true to the best of my knowledge. 8. I confirm I witnessed the labelling of my name and/or that of the individual for whom I am providing consent on the package containing the specimen. 9. I authorize DNAForce Inc. to conduct the genetic test in accordance with its rules and policies, including the use of third party testing facilities.

TERMS AND CONDITIONS 1. Participation in genetic testing is completely voluntary. 2. The genetic test to be performed does not tell us anything about your health or about any health problems you (or your family) may have. DNAForce Inc. does not directly or indirectly practice medicine, or give medical advice or provide medical services as part of its genetic testing and reporting. 3. This test is not guaranteed to be 100% accurate. There is always some very small possibility that the test will not work properly or that an error will occur. There is a low error rate even in the best laboratories. 4. You understand that the samples may be stored for regulatory compliance and quality control testing. You understand that the samples may be used for research, only after all identifiers have been removed from the sample. 5. The results are confidential to the extent allowed by law. They will only be released to third parties or medical professionals with my written consent or as otherwise allowed by law. 6. DNAForce Inc. will take all reasonable measures to deliver your report within a reasonable time but it is not responsible for any delays however caused. 7. DNAForce Inc. does not provide legal advice and you are responsible for obtaining your own legal counsel in relation to any issues pertaining to this test. 8. Testing may be delayed until full payment is provided. I understand that I will receive test results only when the terms of my payment or payment plan have been fulfilled. I understand that the deposit and any partial payments are not refundable. I understand that DNAForce Inc. will hold the initiator of the test primarily responsible for ensuring that full payment is made, and that DNAForce Inc. will ultimately hold all tested parties individually responsible for full payment, regardless of who initiated or requested the DNA test. In addition, I understand that I will be responsible for any collection costs and/or attorney fees associated with a third party collection of the balance due.

RELEASE: DNAForce Inc. and its respective directors, officers, employees, consultants, and agents make no representation and disclaim all expressed and implied warranties and conditions of any kind. Including without limitation, representations, warranties or conditions regarding accuracy, timeliness, completeness, non-infringement, satisfactory quality, merchantability, merchantable quality, or fitness for any particular purpose or those arising by law, statute, usage of trade or course of dealing. DNAForce Inc. and its respective directors, officers, employees, consultants and agents assume no responsibility to you or any third party for the consequences of any errors or omissions. You expressly agree that use of this report is at your sole risk and agree to indemnify, hold harmless and defend DNAForce Inc. and its respective directors, officers, employees, consultants and agents from and against any and all losses, claims, demands, expenses (including legal, and lawyer's fees) or liabilities of whatever nature or kind asserted by, suffered or incurred by third parties arising out of your use of the content in this report, from the collection of the specimen(s), testing procedures, or result of the test, including but not limited to any allegation that you did not have legal right to submit said specimen(s) for testing. The respective directors, officers, employees, consultants and agents of DNAForce Inc. shall not, under any circumstances, be liable for any direct, consequential, incidental, indirect or special damages of any kind, or any other damages whatsoever. Including without limitations, those arising from any decision made or action taken by you in reliance upon the content or those resulting from loss of use, data or profits, whether resulting from the use of or inability to use any content in this report, or any other cause even if caused by the negligence of DNAForce Inc. and its respective directors, officers, employees, consultants and agents, regardless of whether such damages could have been foreseen or prevented. In the event DNAForce Inc. is found liable, damages shall be limited to the value paid for the test conducted. The above limitations and exclusions shall apply to you to the fullest extent that applicable law permits in all actions of any kind, whether based on contract, tort (including without limitation and negligence) or any other legal or equitable theory. Any clause declared invalid shall be deemed severable and not to affect the validity or enforceability of the remainder of these Terms of Use. The laws in force from time to time in the Province of Ontario shall govern this agreement and you hereby submit to the exclusive jurisdiction of the Courts of Ontario. I agree to contact DNAForce Inc. in writing and within 30 days from the date of the report if I have any questions or concerns or claims about the testing process or the outcome of the test. Complaints or claims received after the expiration of the 30 days from receipt of report will be considered expired.

PARENTAL OR GUARDIAN CONSENT IS REQUIRED FOR THE PARTICIPATION OF A CHILD UNDER THE AGE OF 18. I hereby give permission to collect and test biological samples from the minor child or otherwise legally incapable of consenting person or deceased person named in question 2 on page 1. I confirm I have legal authority to consent to the collection of the samples and DNA testing on their behalf and assume all legal responsibility. If this test involves a deceased person I further attest that I am the successor of this person.

