

**DNA Family Check Cancellation/Refund Request Form**RECEIVED:  
AMOUNT APPROVED:  
APPROVED BY:  
DATE:**Cancellation/Refund policy:**

The complete refund policy can also be viewed at [www.dnafamilycheck.com/about/returns](http://www.dnafamilycheck.com/about/returns)

If you decide not to proceed with testing, a refund may be requested within 30 days from the date of order in accordance to the refund policies set out below.

**Refund Policy for Private Home Test Kits**

If the DNA test is cancelled before the kit has been shipped out, a refund can be given less an administration fee of \$35. If the DNA testing services are cancelled after the testing kits have been shipped out, a 50% refund will be applied to the unused kit, minus the shipping fee. All requests for refund must be applied for within 30 days of the initial order. After 30 days, the entire cost of the test is non-refundable.

**Refund Policy for Legal Test Kit** (client arranges collection)

If the DNA test is cancelled before the kit has been shipped out, a refund can be given less an administration fee of \$35. If the DNA testing services are cancelled after the testing kits have been shipped out, a 50% refund will be applied to the unused kit, minus the shipping fee. All requests for refund must be applied for within 30 days of the initial order. After 30 days, the entire cost of the test is non-refundable.

**Refund Policy for Legal Tests** (we arrange specimen collection at one of our collection sites)

There is a \$200 non-refundable deposit for refunds on legal testing. Once the file has been initiated and scheduling has begun, the cost of the test is non-refundable. All requests for refund must be applied for within 30 days of the initial order. After 30 days, the cost of the test is non-refundable. The clients must remember to attend their scheduled specimen collection appointments. If the parties do not show up to their scheduled appointment, the full cost of the appointment still applies and the client must pay for the cost of any additional appointments. Once the sample has been collected and testing begins, the full cost of the test is absolutely non-refundable.

**All cancellation/refund requests must be accompanied by this Cancellation/Refund Request Form. Complete this form and FAX COMPLETED FORMS TO 1.604.325.2208 or email completed form to [support@dnafamilycheck.com](mailto:support@dnafamilycheck.com).**

PLEASE ENSURE THAT ALL FIELDS ARE PROPERLY FILLED OUT. INCOMPLETE AND/OR ILLEGIBLE FORMS WILL NOT BE PROCESSED.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Order ID#: \_\_\_\_\_ File Password: \_\_\_\_\_

Date of Request (dd/mm/yy): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Date of Original Order (dd/mm/yy): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Test Ordered For (if different from above): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Prov: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Original Method of Payment: Visa MasterCard American Express

Credit Card No. (16-digit): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Expiration Date (mm/yy): \_\_\_\_\_ / \_\_\_\_\_

Name of Cardholder: \_\_\_\_\_

Reason for DNA Test Cancellation/Refund (Please Print):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I, \_\_\_\_\_ have read through the cancellation/refund policy. I understand and fully comply with the policies set forth and I hereby authorize the cancellation of my DNA test order.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Upon approval of your cancellation and/or refund request, your test (order ID, case, and/or file) with the laboratory will immediately be cancelled. Refunds will be processed back to the same credit card that was originally used to order the DNA test.

**FAX COMPLETED FORMS TO 1.604.325.2208 or email completed forms to [support@dnafamilycheck.com](mailto:support@dnafamilycheck.com)**