

ANNUAL REGISTRATION
FORM REFERENCE MATERIALS

for year _____

Name and DELIVERY/INVOICING address: _____

Contact person: _____

Phone: _____ E-mail: _____

	INDICATE THE NUMBER OF SETs/month											
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
SET 1 – MID-IR spectroscopy fat, protein, lactose												
extra SET 1												
SET 2 – urea												
extra SET 2												
SET 3A – freezing point <small>(NON-PRESERVED SAMPLES)</small>												
extra SET 3A												
SET 3B – freezing point <small>(PRESERVED SAMPLES)</small>												
extra SET 3B												
SET 4 – enumeration of somatic cells												
extra SET 4												
SET 5 – pasteurised milk												
extra SET 5												
SET 6 – pasteurised cream												
extra SET 6												
SET 7 – sensory analysis												
extra SET 7												
Please declare Shipping/delivery method <input type="checkbox"/> By post <input type="checkbox"/> Personal take-over <input type="checkbox"/> Other (by agreement) Please declare Shippingdelivery method By post Personal takeover Other by agreement												

Date: _____

Signature: _____