

## FARM DETAILS

Farm Owner: _____	Farm Name: _____
Address: _____	Mobile: _____
_____	Landline: _____
_____	Email: _____
Supply No: _____	Dairy Co: _____

## FOR OWNER TO SIGN & COMPLETE

**I wish to withdraw from the LIC BVD Monitoring Pack. Please do not organise any further samples to be taken.**

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: DD / MM / YY

**Please advise your local LIC Field Services Manager of your decision to opt-out or send signed and completed forms to [ahl@lic.co.nz](mailto:ahl@lic.co.nz)**