

**LETTER OF UNDERSTANDING**

**BETWEEN THE INTERBULL CENTRE AND**

Organization: ......................................................

Address: .................................................................................................

Country: ........................................

**For participation in the Interbull genetic evaluation service for SNP training of clinical mastitis (all breeds)**

**To be signed by the member organization or designated signatory in the participating country**

The following points are understood and accepted:

1. The results of SNP training of clinical mastitis will only be provided to the participating countries for the purpose of SNP training. **The results may not used for publication purposes.**
2. The general service, code of practice and responsibilities described in the document titled "Code of practice for the international genetic evaluation of dairy bulls at the Interbull Centre"
3. The specific service and fee structure described in the same document applicable to evaluations for novel traits
4. The country has subscribed to the Interbull service for production traits and has signed a service contract with the Interbull Centre

Date .......................................................

Signature...............................................

Name ....................................................

For .........................................................