

Australian Warmblood Horse Association Limited ABN: 56 063 906 150 Email: awhansw@acenet.com.au

**Horse Health Declaration** 

Event name: Australian Warmblood Horse Association Limited 2014 Assessment Tour

Owner	or Person in charge of Horse(s)						
Full name of person or owner in charge :							
Full add	dress (residential):						
State :							
Home	phone: Mobile phone :						
Email a	Email address :@						
I,							
have b	have been in good health, eating normally and have not shown signs of illness during the last 3 days						
leading	up to the above mentioned event. I give my authorisation for the designated AWHA Ltd Official						
to call f	for veterinary inspection of this/these horse/s in my care should they be showing signs of illness						
at any	time during the course of the event. I agree to pay any veterinary fees for the horse/s described						
incurre	d as a result of this.						
I AGRE	EE TO ENSURE THAT:						
1.	If required before movement, all horses will be shampooed, rinsed and allowed to dry, and						
	their hooves will be picked clean of all solid material and washed. All horses described are						
	free of cattle ticks before entering the stud stop/venue.						
2.	All vehicles (where applicable) and equipment accompanying the horse/s will be in a clean						
	condition at the start of travel to the above mentioned event. All appropriate permits and						
	waybills have been completed and accompany the horse/s (where applicable).						
3.	In the event of horse movement restrictions, I will be responsible for the care, maintenance						
	and cost of my horse/s including feeding and watering.						
4.	I agree to abide by all conditions and directions of the AWHA Ltd rules and regulations and						
	tour organisers.						
5.	I acknowledge that failure to comply with the above may result in refusal of entry to the stud						
	stop/venue with disqualification or other disciplinary action as decided by the AWHA Ltd						
	Officials.						
6.	The information contained in this Horse Health Declaration is true and correct to the best of						
	my knowledge.						
Signatu	ure:						

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## To be Completed by all Owners/Persons in charge of Horse(s)

## Property of origin of horse(s):

Full address (if o	different to above)	:					
State :		F	Post code:		DPI PIC num	ber:	
No of Stock	Breed	Des	cription / Sex	Brand / Microchip No*	Registered Name		Stable Name
Example :	Warmblood	Ch	estnut Mare	123456789	May Lodge Fudge		Fudge
	Horse(s) overni	yht? Please tick : →	Yes		No		
Saturday		Sunday	Monday	Tuesday	Wednesday	Thursday	Friday

PLEASE NOTE: mandatory Hendra virus vaccination for Queensland and northern New South Wales exhibits. The AWHA Ltd is adopting Australian best-practice in the fight against Hendra virus, with all Queensland and northern New South Wales based horses attending or competing at the Australian Warmblood Horse Association 2014 Assessment Tour requiring mandatory Hendra virus vaccination\*\*. Only horses which have proof of vaccination will be allowed to enter the assessment tour. Queensland and northern New South Wales participants will be required to provide the Hendra Vaccination Certificate of Completion issued by Zoetis Australia for each exhibit entered at the time of entry\*\*.

Note: northern New South Wales refers to 'from Kempsey, north to the Queensland border'.

Last updated: 10 December 2013

<sup>\*</sup> Queensland and northern New South Wales participants will be required to provide the microchip number at the time of entry for each vaccinated horse. Microchip numbers are supplied at the first dose of the Hendra vaccine. Entries will not be accepted without a microchip number.

<sup>\*\*</sup> Not applicable for foals less than seven months of age.