

Royal National Capital Agricultural Society Exhibition Park in Canberra (EPIC), Flemington, Road, Mitchell, ACT. Property Identification Code (PIC): NG750154

HORSE HEALTH DECLARATION

THIS FORM MUST ACCOMPANY HORSE(S) TO THE SHOW AND BE HANDED TO THE OFFICIAL AT GATE 9. FAILURE TO PROVIDE A CORRECT, FULLY COMPLETED AND LEGIBLE FORM MAY RESULT IN DISQUALIFICATION. DAY TRIPPERS MUST PROVIDE A FORM FOR EVERY HORSE ENTERING EPIC EACH DAY,

EACH HORSE LISTED ON THIS FORM MUST HAVE BEEN ENTERED IN THE NAME OF THE SAME EXHIBITOR. TRAVELLED TOGETHER TO THE SHOW ON THE SAME TRANSPORT AND BE FROM THE SAME STABLED LOCATION PIC. IF THESE THREE CONDITIONS ARE NOT MET A SEPARATE FORM IS TO BE COMPLETED.

1. Full name and address of Exhibitor or person responsible for the horse(s).		2. Contact mobile phone number.
3. Full address of property from which the horse(s) hav	e travelled. 4. Post Code.	5. Property Identification Code (PIC).
6. Name of person in charge of horse(s) travelled to EPIC. (If different to above).	7. Contact mobile phone number.	8. PIC of Property if any horse was unloaded during travel to EPIC.

9. Full description of each horse.

Each Horse's Registered Name.	Microchip Number.	Description of Horse. (Sex, Breed).	Hendra Virus Vaccinated. (Y/N)	PIC to which Horse is returning.

10. Arrival date at EPIC.

11. Proposed departure date.

12. Declaration by Exhibitor of the horse(s).

declare that each horse described in section 9 above

has been in good health, eating normally and has not shown signs of illness during the last five (5) days prior to entering the destination (EPIC). I give my authorisation for the designation Steward to call for veterinary inspection and treatment of a horse in my care should it be showing signs of illness or injury at any time during the course of the Show. I agree to pay for any veterinary fees for the horse incurred as a result of this.

I further agree to ensure:

1. Each horse, transport vehicle, and all equipment accompanying each horse will be clean and free of solid material that could contain disease agents, prior to departing the property of origin or any property at which the any horse may have been unloaded during travel from property of origin to Exhibition Park in Canberra (EPIC).

2. In the event of horse movement restrictions, I will be responsible for all of the care and maintenance of each horse including, feeding and watering, and all associated costs including veterinary fees.

	Print Name.

/ / Date.

Signature.

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