

# Horse Event Participation Declaration



Department of Agriculture and Food  
Government of Western Australia



Event: \_\_\_\_\_ Event Date: \_\_\_\_\_

Name of Person in Charge of Horse/s: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

*Please ensure you use a separate form for different owners.*

Horse/s Name	Identification (Colour / Markings / Brand)

Address of Property from which the horse moved to the Event:

\_\_\_\_\_

\_\_\_\_\_

Address of Property from which the horse moved to the Event(If different from above):

\_\_\_\_\_

\_\_\_\_\_

## Health of Horse

I \_\_\_\_\_ declare that the horse/(s) named above has/have been in been in good health, eating normally and not shown signs of respiratory disease during the last 3 days leading up the event. I give my authorisation for the designated Event Horse Health Official to call for veterinary inspection of the horse/(s) named above and in my care should they be showing signs of respiratory illness at any time during the course of the event. I agree to pay any veterinary fees incurred as a result of this veterinary examination.

Signed \_\_\_\_\_ Date: \_\_\_\_\_

## Cleaning and Disinfection of Horse Gear

I \_\_\_\_\_ declare that all horse named equipment (tack, bridles, brushes, buckets and other articles that have come into contact with equines) and the horse transport vehicle have been cleaned and disinfected before leaving the property to travel to this event.

Signed \_\_\_\_\_ Date: \_\_\_\_\_