



Queensland Agricultural Shows

Biosecurity Animal Health Declaration/Movement Record

Name of Event/Activity: _____ Date: _____

OWNER OR PERSON IN CHARGE OF ANIMALS					
FULL NAME:					
HOME ADDRESS:					
POSTAL ADDRESS:					
EMAIL:					
PHONE:			MOBILE:		
PROPERTY OF ORIGIN OF ANIMALS					
FULL ADDRESS: (if different to above)					
PIC NUMBER: (Property Identification Code)		_ _ _ _ _			
Event PIC NUMBER (Property Identification Code)		_ _ _ _ _			
Destination PIC NUMBER: (Property Identification Code) if not returning to original PIC nominated above		_ _ _ _ _			
DETAILS OF ALL ANIMALS BEING BROUGHT ONTO THE GROUNDS (USE ADDITIONAL SHEETS AS REQUIRED)					
CLASS NO.	REGISTERED NAME/DESCRIPTION (i.e. 4 island red, poultry)	SEX	MICROCHIP/BRAND/NLIS	ENTRY FEE	FREE of notifiable diseases including JD Yes/No

ENTRY FEES MUST ACCOMPANY THIS FORM.

ENCLOSED TOTAL: \$

Are animals being contained overnight at this event? YES NO

Declaration by owner or person in charge of animal/s attending:

I, _____ declare that the animals named above has / have been in good health, eating normally and not shown signs of illness during the last 3 days leading up to this event. I give my authorisation for the Event Organising Committee/Manager to call for veterinary inspection of the animals named above and 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 incurred for the abovementioned animals as a result of this veterinary examination.

I AGREE TO ENSURE THAT PRIOR TO ARRIVAL:

1. All animals will be shampooed and or cleaned, rinsed and allowed to dry, and their hooves/legs/feet will have been picked clean of all solid material and washed with shampoo.
2. All vehicles and equipment accompanying the animals will be cleaned to remove all solid material that could contain disease agents, and then disinfected.

