



## SPRINGSURE PASTORAL AND AGRICULTURAL SOCIETY

# ENTRY FORM

Office Use Only	Section	Class	Exhibit	Entry Fee	
				\$	c

Exhibitors are specially requested to state in legible figures the number of the section and class in which exhibit is to be entered.

**ENTRY FEES MUST ACCOMPANY ENTRY**

Entry Forms can be downloaded from [www.springsureshow.com.au](http://www.springsureshow.com.au)

**Name of Exhibitor (Mr, Mrs or Miss)** \_\_\_\_\_

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

Email: \_\_\_\_\_



# Queensland Ag 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 animal/s 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 animal/s 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 above mentioned animals as a result of this veterinary examination.

**I AGREE TO ENSURE THAT PRIOR TO ARRIVAL:**

- 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.
- All vehicles and equipment accompanying the animals will be cleaned to remove all solid material that could contain disease agents, and then disinfected.

**I FURTHER DECLARE THAT:**

- The information contained in this Biosecurity Declaration and Movement Record is true and correct to the best of my knowledge.
- I agree to abide by all conditions that may be imposed at any time by the Event Organising Committee/Manager. I also agree to abide by and accept the regulations as printed in the schedule and make these entries subject to such regulations and rules of the committee.
- I acknowledge that in failure to comply, I may be directed to leave and my nominations will be forfeited.
- I acknowledge that decontamination and disinfection procedures may be required of me if instructed by the Event Organising Committee/Manager.
- All animals described above are free of cattle ticks before entering the event.
- I acknowledge that the animals above are from a JOHNE'S DISEASE FREE herd/flock.
- I acknowledge the above mentioned animals to the best of my knowledge are free from any other notifiable diseases. If unsure what notifiable diseases affect your breed of animal/s, please look at the list provided by DAF <https://www.daf.qld.gov.au/animal-industries/animal-health-and-diseases/notifiable>
- I acknowledge that there is a possibility that animals might become infected with disease agents as a result of any movements and if necessary animals and premises will be placed on a restricted list in accordance with any Legislation covering such occurrences including policies and procedures in effect at that time. I agree and acknowledge that the Manager/Event Organising Committee, it's State or National Affiliated bodies and their members are not in any way liable for any cost, expense, loss, damage, claim, action, proceeding or other liability incurred by or made against me as a result of any movement of animals to the Event/Farm.

**PLEASE COMPLETE THE CATTLE TICK RISK MINIMISATION REQUIREMENTS**

NOTE only complete if you have a listed 'primary or secondary' host animal

Primary host species of ticks: deer and buffalo

Secondary host species of ticks: camelid, donkey, goat, mule and sheep

Do you have primary or secondary host animals? Please circle YES or NO, if no please sign and date form

<b>Animal/s are (Select One)</b>	<input type="checkbox"/>	From Cattle Tick Free Area of Queensland or from interstate
	<input type="checkbox"/>	From Cattle Tick Infested Area of Queensland or from Infested Land and the Animal/s has been manually inspected and is tick free
	<input type="checkbox"/>	<input type="checkbox"/> No cattle, deer, bison and buffalo on the property of origin, or <input type="checkbox"/> Cattle, deer, bison and buffalo on the property of origin but show entrant/s isolated from other animals.
	<input type="checkbox"/>	From Cattle Tick Infested Area of Queensland or from Infested Land and the Animal/s has been manually inspected and is tick free and have received a Chemical treatment Treatment: _____ Method of Treatment: _____ Date: _____ <i>(Chemical used) (Spray)</i>
<input type="checkbox"/>	From Cattle Tick Infested Area of Queensland or from Infested Land and the Animal/s is stable and groomed and must: <ul style="list-style-type: none"> <li>• Be led and tractable</li> <li>• Be manageable</li> <li>• Have been groomed regularly (daily) for a period of 35 days</li> <li>• At all times, be kept a minimum of 10 metres from the nearest cattle, deer, bison and buffalo.</li> </ul>	

Signature

Date

NOTE: It is recommended to keep a copy of this form by the owner or person in charge of animal/s and event committee for a minimum of 5 years. This form covers sheep/goat/camelid/alpaca/poultry. Please complete relevant forms for horse, pig and cattle.