



Murieta Equestrian Center

# Owner/Trainer Health Declaration Form

I, \_\_\_\_\_, as the owner/trainer/agent, declare that my horse(s) that arrived at the Murieta Equestrian Center on \_\_\_\_\_ (date)

Have **Not:**

- Been on any competition grounds that have (or had) an active positive case of EHV-1 or EHM (or any other reportable disease) within the last 14 days
- Been on the grounds of, or at a private facility, barn, stable, or veterinary clinic that has (or had) a positive of EHV-1 or EHM (or any other reportable disease) within the last 14 days
- Been in contact with a horse that has tested positive of EHV-1 or EHM (or any other reportable disease) within the last 14 days

Have:

- Maintained a twice daily temperature log that is available for review by competition management or Steward/TD

Veterinarian \_\_\_\_\_

Veterinarian Email \_\_\_\_\_

Veterinarian Phone \_\_\_\_\_

Horse(s): Registered Name, Appropriate Organization (i.e. USEF/APHA/AQHA/Breed, etc.) & Registration Number

HORSE NAME	ORGANIZATION	REGISTRATION NUMEBR(S)
_____	_____	_____
_____	_____	_____
_____	_____	_____

Have any of these horses been out of state or recently imported? Yes  No

**To be filled out by person submitting form:**

Trainer/Owner/Agent Responsible for the truthfulness and accuracy of the aforementioned information

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Email \_\_\_\_\_

### Vet Statement of Health (Optional)

I, \_\_\_\_\_, the attending veterinarian, declares on (date) \_\_\_\_\_, that the aforementioned horse(s) have been evaluated in 5 days of arrival and are confirmed that they:

- Are in good health and with no sign of infectious disease
- Are NOT demonstrating any signs of EHV-1
- Have NOT had any known exposure to EHV-1 (or any reportable disease) in the past 21 says
- Are NOT coming from a property with known EHV-1 (or any reportable disease) with positive cases

Veterinarian Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_