Biosecurity Horse Health Declaration &

Movement Record at Event

TO BE COMPLETED AND EMAILED TO nqquarterhorseassoc@gmail.com PRIOR TO THE EVENT OR MUST BE HANDED INTO THE NQQHA SECRETARY UPON ARRIVAL – FULLY COMPLETE	
Event Name: NQQHA A Class Western Performance Show	Date: 5th & 6th September 2026 Location: Tully Horse Performance Centre, Tully Gorge Rd, Tully PIC: QACS0234
OWNER or PERSON IN CHARGE OF HORSE/S	
Full Name	
Full Address	
Email	
Phone (Mobile)	
PROPERTY OF ORIGIN OF HORSE/S	
Full Address (If different to above)	
PIC Number (Property Identification Code)	
MOVEMENT RECORD	
Date arrived at event: Time:	Date departed event: Time:

	REGISTERED NAME (Official Name of Horse)	Description /sex	Microchip/Brand	Breed	Hendra Vac Current Y/N
1					
2					
3					
4					
5					

Declaration over the page to be completed and signed.

Declaration by Owner or person in charge of Horse/s

I declare that the horse/s named above has/have been in good health, eating normally, and not showing signs of illness during the last 3 days leading up to the attendance to this event today. I give my authorisation for the designated steward to call for veterinary inspection of the horse/s named above and in my care should they show signs of illness at any time during the course of the event. I agree to pay any veterinary fees incurred as a result of this.

I AGREE TO ENSURE THAT:

- If required before movement, all horses will be shampooed, rinsed and allowed to dry, and their hooves will be picked clean of all solid material and washed and shampooed.
- All vehicles and equipment accompanying the horses will be in a clean condition at the start of travel to the event.
- The information contained in this Biosecurity Horse Health Declaration is true and correct to the best of my knowledge.
- I agree to abide by all conditions and directions of the Organising Committee.
- I acknowledge that failure to comply with the above may result in refusal of entry to the venue: disqualification or other disciplinary action decided by the North Queensland Quarter Horse Association or the event organising committee.
- In the event of horse movement restrictions, each participant will be responsible for the care, maintenance and cost of their horse/s including but not limited to feeding and watering.
- I acknowledge that these is a possibility that horses might become infected with disease agents as a result of any movements and if necessary horses and premises will be quarantined in accordance with any legislation covering such occurrences including policies and procedures in effect at the time. I agree and acknowledge that the Manager/Event Organising Committee, its State or National Affiliated Bodies and their members are not in any way liable for any cost, expense, loss, damage, action, proceeding or other liability incurred by or made against me as a result of any movement of horses to the event/farm/grounds.

Signature	Name	Date