

Health Declaration Form

Equine Influenza

Name of horse:
<u>Temperature</u>
This horse's temperature was taken before it travelled to the races. It's temperature was recorded as:
C
<u>Declaration</u>
This form is to certify that I, the Responsible Person for this horse, declare that the horse has not shown any clinical symptoms of Equine Influenza within the previous 14 days. I acknowledge that I need to present this form, together with the horse's passport, to the BHA equine welfare staff at the racecourse stable office.
The horse's passport will be checked to ensure that the horse has been vaccinated within the past six months.
Responsible Person Name:
Signature:
***NB. This form must be provided to the racecourse stable office IN ADVANCE of the

The BHA uses the data you provide in this form to administer and regulate horseracing. Further information on how we use this data is set out in more detail in the BHA Privacy Notice, which can be obtained from the BHA website.

animal being unloaded from its transport.***