

VACCINATION DECLARATION

ONE FORM PER HORSE TO BE COMPLETED BY VETERINARIAN AND SUBMITTED
WITH ENTRIES FOR HORSE TO BE ELIGIBLE TO COMPETE

NAME OF HORSE (AS ENTERED IN COMPETITION) :

NAME OF OWNER OF HORSE :

DATE AND NAME OF MOST RECENT VACCINATION

DATE FOR HERPES 1&4		NAME OF VACCINE	
DATE FOR INFLUENZA		NAME OF VACCINE	
OR			
DATE FOR COMBINATION VACCINE OF HERPES AND INFLUENZA		NAME OF VACCINE	

Per Equestrian Canada Article 519A – Vaccinations : The horse named above has been enrolled in a regular and consistent program of vaccination against EHV 4/1 and Influenza with the most recent booster being given within six months prior to the competition but not within seven days of the competition. (Canada's National Arabian Championship August 8 – 17 2024)

Veterinarian Print Name: _____

Veterinarian Signature: _____