



USEF Horse Health Declaration

(Optional)

I _____, as the owner/train/agent declare that the horse(s)
that arrived at _____ Competition on _____.

Resided in a New World Screwworm Infested State in the prior 14 days. YES or NO
(If yes, must follow USEF Screwworm Protocols)

Horses Meets the following health requirements:

1. All horses have had temperature taken twice daily for the preceding 3 days and ALL temperatures were below 101.5F.
2. All horses have had no observable clinical signs of ill health such as nasal discharge, abnormal feces, abnormal gait or change in feed or water consumption for the last 3 days.
3. All Horses who are more than 7 months of age have documented evidence of Equine Influenza Virus and Equine Herpes Virus (Rhinopneumonitis) vaccinations within six months prior to the date of entering the competition stables.
4. Horses have NOT been on any premises that have a suspected or confirmed case of Vesicular Stomatitis in the prior 14 days.
5. Horses have NOT been in a Vesicular Stomatitis Affected County within the last 14 days.
6. Horses have NOT tested positive for Equine Herpesvirus-1 in the last 21 days OR if the horse has tested positive for EHV-1 in the previous 21 days it subsequently had two negative EHV-1 PCR nasal swab tests 7 days apart in the prior 21 days.
7. Does not originate from a premises under quarantine for an equine infectious disease.

Veterinarian Name _____ Veterinarian Email _____
Veterinarian Phone Number _____

Horses (Name and USEF ID Required)

_____	_____
_____	_____
_____	_____

Trainer/Owner/Agent responsible for the truthfulness an accuracy of the aforementioned
information _____(Printed Name) Email _____

_____ (signature) _____ Date

