



HORSES TRAVELLING TO AND RETURNING FROM TOOWOOMBA ROYAL SHOW (DESTINATION) HORSE HEALTH DECLARATION AND WAYBILL

[Queensland Stock Act 1915 (S.22)]

1. Full Name of person responsible for the horse/s 2. Contact Phone Number

3. Full Name and Postal Address of the owner of the horse/s (if horse owner is different to above) 4. Postcode

5. Full property name and address of origin of the horse/s (if different to above address)

6. Registered Property Identification Code (PIC)

7. Name of Person in charge of the horse/s being travelled 8. Vehicle Registration Numbers 9. Movement Commence

/ / am/pm

8. Description of Horse/s Date Time

No of Stock	Breed	Description/Sex	Horse Brands/Microchip number

ARE YOU STABLING HORSES OVERNIGHT (PLEASE CIRCLE) YES NO

PLEASE INDICATE THE NIGHTS YOU WILL BE STABLING

DAY & DATE	DAY & DATE	DAY & DATE	DAY & DATE	DAY & DATE	DAY & DATE	DAY & DATE

Arrival date at Grounds Departure date from Grounds Queensland Travel Permit Number Date of issue

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9. I declare that the horse/s described in section 8 have been in
(Full Name)

good health, eating normally and have not shown signs of illness during the last 3 days leading up to entering the **Toowoomba Show Grounds**. I give my authorisation for the designated Steward to call for veterinary inspection of this/these horse/s in my care should they be showing signs of illness at any time during the course of the event. I agree to pay any veterinary fees for the horse/s described in section 8 incurred as a result of this.

I AGREE TO ENSURE THAT:

1. 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.
2. All vehicles and equipment accompanying the horse/s will be in a clean condition at the start of travel to the **Toowoomba Show Grounds**
3. All horses travelling from the cattle tick infected area must be accompanied by the appropriate Biosecurity Queensland permits
4. In the event of horse movement restrictions, I will be responsible for the care, maintenance and cost of my horse/s including feeding and watering.
5. All horses described in section 8 are free of cattle ticks before entering the **Grounds**
6. I acknowledge that failure to comply with the above may result in refusal of entry to the **Grounds**.

Signature

Date

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