

# EQUINE BIOSECURITY & ANIMAL CARE FORM



The Calgary Stampede is committed to animal health and safety year round. We employ several preventative measures as part of our biosecurity plan and encourage animal owners to participate in minimizing the risks to protect the health and welfare of the agriculture industry. As such, we require a detailed list of each horse you intend to bring to the Calgary Stampede Show. It is imperative that this list is accurate with ALL horses listed and kept up to date. Should you make changes to the horses you plan to bring please update this form and return to us prior to arriving on Stampede Park. Please let us know if you have any questions.

**All horses arriving on Stampede Park need to have been in good health, with body temperature(s) below 102°F (38.9°C), eating normally, and has/have not shown signs of infectious disease for the three (3) days preceding arrival at this event. It is strongly recommended that all horses have received a rhinopneumonitis & influenza vaccine within the past 180 days.**

**EXHIBITOR NAME:** \_\_\_\_\_

**COMPETITION/SHOWCASE:** \_\_\_\_\_

**HORSES IN SHIPMENT:**

Registered Name of Horse <i>List Barn Name if Grade</i>	Registration Number	Breed	Colour	Gender	Age



I have a current coggins test for each horse on file:  Yes  No

*If yes, when does it expire?*

*Please note, Coggins is not required to attend the show.*

**HORSE SHIPMENT INFORMATION:**

**Origination Information (address from which the horse(s) is arriving from):**

Address \_\_\_\_\_

City \_\_\_\_\_ Province/State \_\_\_\_\_ Postal Code/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Premise ID (if applicable): \_\_\_\_\_

**Return Information (address to which the horse(s) will move after the event):**

Address \_\_\_\_\_

City \_\_\_\_\_ Province/State \_\_\_\_\_ Postal Code/Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Premise ID (if applicable): \_\_\_\_\_

**CONTACT INFORMATION:**

**Responsible Party (person in charge of horse(s) at the event)**

Name: \_\_\_\_\_ Farm Name: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address: \_\_\_\_\_

Arrival Date: \_\_\_\_\_

*I certify that the above information is true to the best of my knowledge.*

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**Please return completed forms to the Calgary Stampede Entries Office via email or fax.**

**Email: [agriculture@calgarystampede.com](mailto:agriculture@calgarystampede.com)**

**Fax: (403)410-4549**