Instruction to Owners / Exhibitors:

##### Complete **Part 1** of this form

##### This form is not an interstate entry permit. However, if stock is likely to be sold or moved onwards from a show, **Part 2** should be completed by your local animal health official to assist authorities prepare the necessary official interstate movement certificates.

##### If Johnes Disease (JD) testing has been undertaken, get you Private Vet to complete **Part 3,** or attach a veterinary certificate.

#####  This Herd Health Status form is valid for 6 months from the date of issue. The owner must notify the issuing Government veterinarian or Animal Health Officer of any change in herd status or other information on the form subsequent to completion of this form.

**THIS FORM IS NOT ACCEPTABLE AS AN ENTRY PERMIT TO OTHER STATES AND/OR ZONES**

|  |  |
| --- | --- |
| PART 1 |  **OWNER/EXHIBITOR DECLARATION** |

|  |  |
| --- | --- |
| Trading Name |  |
| Address |  | Postcode |  |
| Property Address |  | Postcode |  |
| (Prop Name, Rural Road & Number) |  |
|  |
| Phone |  | Fax |  |
| PIC No |  | Stud Name |  |
| Property alpaca are located (if different): |  |
| Show |  | Pic No |  | Date |  |

**ALPACA YOUTH PARADERS’ COMPETITION**

|  |  |  |  |
| --- | --- | --- | --- |
| **ANIMAL IDENTIFICATION** as listed on (i) Halter Show entry form |  | or (ii) \* attached form X |  |
| (\* to only be used if alpacas are not entered into the Alpaca Halter Show). |
| NOTE: A show or sale may want to use only the higher entry requirements below and may delete one or more clauses that do not meet the standard. |
| I, owner/manager, (please print)  |  |
| Of (print address)  |  |
| Declare that with regard to Johne’s disease; (**cross the box for the clause/s which apply)** the herd does not have an infected or suspect status for Bovine or Ovine Johne’s Disease and: |
|  | 1. The alpaca identified above originate from a Free Zone Protected Area Beef Protected Area for BJD Cattle Management Area
 |
|  | (2.1) The alpaca identified above originate from assessed herds under the Alpaca MAP, with status attained in the year indicated; e.g. MN1 2010 |
|  | MN1 | MN2 | MN3 | Herd Status Certificate No |  | Date of Expiry |  |

|  |  |
| --- | --- |
|  | (2.2) The alpaca identified above originate from a herd that is currently under test for entry to the Alpaca MAP and I have no reason to suspect that Johne’s Disease exists on any of the properties listed above. |
|  | (2.3) The alpaca identified above originate from a herd that is registered in the Australian Alpaca Association’s Q-Alpaca Program and satisfy the requirements for MN1 equivalence. |
|  | Certificate No |  | Date of Expiry |  |
|  | (2.4) The alpaca identified above originate from herds that have been Check Tested negative (i.e. CT) in the past 12 months. |
|  | Approved Veterinarian |  | Date Tested |  |
|  | (2.5) Where applicable the alpaca identified above which are 1 year of age or older have been tested by faecal culture by a registered veterinarian negative results within 6 months before the date of the show/sale/exhibition. Where the alpaca are less than 1 year of age the Dam will be tested. |
|  | (2.6) The alpaca identified above originate from herds that have not been assessed for Johne’s Disease (i.e.: Non Assessed Status). |

Exhibitors may also need additional certification to move between Zones or between States. Check with local veterinary authority. The above information, including the description of the animals and property/ies of origin is complete, true and correct.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature |  | Date |  |

# ATTACHMENT TO OWNER/EXHIBITOR DECLARATION

**ALPACA YOUNG PARADERS COMPETITION**

## [Show name and Date]

|  |  |  |
| --- | --- | --- |
| **ALPACA IDENTIFICATION** | Total Number |  |

|  |  |  |  |
| --- | --- | --- | --- |
| NAME including Stud Name | Date of Birth | Male/Female/ Wether | IAR # |
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| --- | --- | --- | --- |
| Signature |  | Date |  |

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| THIS ATTACHMENT IS TO BE USED **ONLY BY THOSE OWNERS LENDING STOCK** FOR THE PURPOSES OF THE PARADER COMPETITION AND WHO ARE NOT ENTERING THE HALTER COMPETITION AS SUCH OR OTHERWISE REQUIRED TO COMPLETE AN APPLICATION FOR ENTRY FORM. |
|  |
| A COMPLETED DECLARATION FORM AND THIS ATTACHMENT MUST BE LODGED NO LATER THAN **[CLOSING DATE]** |

|  |  |  |
| --- | --- | --- |
| Convener | [Name] | [Email] |
|  | [Phone] |