

2014 Jacksonville Winter Series Equine Health Affidavit

Name of attending veterinarian

Certify that the listed horses:

Have not shown symptoms of or been treated for EHV-4/1 within the past 28 days

Have not been at a facility under quarantine for EHV-4/1 or exposed to any horses showing symptoms for EHV-4/1 within the past 28 days

PROOF OF VACCINATION

Horse (Show Name)	Equine Influenza Vaccination Date	EHV 1 Vaccination Date	EHV 4 Vaccination Date	Brand	Serial # & Expiration Date

Within 6 months (180 days) of each show: **Equine Influenza**

Within 3 months (90 days) of each show: **EHV 1 & EHV 4**

Signature of attending veterinarian

Date