

# BERWICK AG SOCIETY ALPACA SHOW

Entries Close: Friday 27th January 2012

# ALPACA ENTRY FORM

SHORT FLEECE SHOW

# 25th February 2012

Entries To: Alpaca Entry - Berwick A&H Society Inc, PO Box 442, Berwick, 3806

Name of Exhibitor: \_\_\_\_\_

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

Stud Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Agents Name: \_\_\_\_\_

Pen my animals with: \_\_\_\_\_

Email: \_\_\_\_\_

## ANIMAL CLASSES - SHORT FLEECE SHOW

Class	Name Of Animal Including Prefix	IAR	Date Of Birth	Date Of Last Shearing*	Sire Of Animal Including Prefix	Dam Of Animal Including Prefix	Age In Months	Colour

\* A copy of each Exhibit's Registration Certificate must be submitted with the Entry Form

\* Date of Last Shearing in the format DD / MM / YYYY (eg: 04/11/2010)

## FLEECE CLASSES

Class	Name Of Animal Including Prefix	IAR	Date Of Birth	Age Of Animal When Shorn * (In Months)	Age Of Fleece ** (In Months)	Colour	Sire Of Animal Including Prefix	Dam Of Animal Including Prefix

\* Fleece classes will be determined by the age of the animal at the time of shearing    \*\* Age of fleece means the time in months between this shearing and previous shearing, if applicable.

### DECLARATION

- I have read the General Regulations and Conditions contained in the Show Schedule and understand that my entry in the Show has been accepted subject to those Regulations and Conditions. I agree to be bound by all the Regulations and Conditions outlined in the Australian Alpaca Association Showing Rules Manual, and abide by all decisions in all matters in connection with or arising out of the competition.
- A copy of the pedigree certificate of each Alpaca (both sides) for all animal & fleece entries, must accompany this entry form.
- I certify that the details on this entry form are correct.
- I agree that no exhibit shall be exhibited unless from a herd or stud/property for which either:
  - proof of accreditation under Alpaca Johnes' Disease Market Assurance Program (AUDMAP) is provided or origin from a State recognised as a Johnes' Disease protected area, or
  - for non-assessed alpacas not originating from a State recognised as a Johnes' Disease protected area, a signed declaration verifying that the exhibits have not at any period of their lifetime been in a herd or on a property, where at any time Johnes' Disease was known, or suspected to exist.

NOTE: A separate animal health declaration is included with this schedule. It must be signed by the exhibitor or his/her agent and returned with this entry form. For penning protocol, as per the current Australian Johnes' Disease Market Assurance Program for Alpaca - Rules and Guidelines, please indicate status by crossing the appropriate box:

Entry Details	Cheques payable to: Berwick A&H Society Inc
Animals	@ \$20 each \$
Fleeces	@ \$10 each \$
Junior Handler	Free \$
Sires Progeny	@ \$10 each \$
Exhibitor Ticket	@ \$10 each (1 day) \$
<b>Total Entry</b>	
\$	

NON ASSESSED  CHECK TESTED  Q Alpaca  MN 1 / 2 / 3  CERTIFICATE NO

Please include a stamped self-address envelope for return of exhibitor tickets (if purchased)

Number of pens required (2.4m x 1.2m): \_\_\_\_\_

Exhibitor's Signature: \_\_\_\_\_

Agent's Signature: \_\_\_\_\_

ALPACA HERD HEALTH STATUS DECLARATION FOR SHOWS & SALES

Instruction to Owners / Exhibitors:

- 1. Complete **Part 1** of this form
- 2. 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.
- 3. If Johnes Disease (JD) testing has been undertaken, get you Private Vet to complete **Part 3**, or attach a veterinary certificate.
- 4. 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 \_\_\_\_\_

PHONE NO \_\_\_\_\_ FAX NO \_\_\_\_\_

PROPERTY NAME \_\_\_\_\_ STUD NAME \_\_\_\_\_

PROPERTY ON WHICH ALPACA ARE CURRENTLY RUN (IF DIFFERENT) \_\_\_\_\_

SHOW: Berwick Ag Society Alpaca Show DATE 25th February 2012

**ANIMAL IDENTIFICATION** (listed on entry form)

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 Johnes's disease; **(Tick the box for the clause/s which apply)**

(1) The alpaca identified above originate from a Free  Protected  Control  Residual  Zone for BJD. In alpaca

(2.1) The alpaca identified above originate from assessed herds under the Alpaca MAP, with status attained in the year indicated; eg MN1  99

MN1  MN2  MN3  Herd Status Certificate No \_\_\_\_\_ Date of Expiry \_\_\_\_\_

(2.2) The alpaca identified above originate from herds that have not been assessed for Johnes's Disease (i.e.: Non Assessed Status).

(2.3) The alpaca identified above originate from herds that have been Check Tested negative (i.e. CT) in the past 12 months.

Date Tested \_\_\_\_\_ Approved Veterinarian \_\_\_\_\_

(2.4) 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.

(2.5) The alpaca identified above originate from a herd that is registered in the Australian Alpaca Association's Q-Alpaca Program.

(2.6) 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 Johnes's Disease exists on any of the properties listed above.

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 \_\_\_\_\_

Alpaca Health Declaration - VER Alpaca Show 2011-2012