

## 2024 HAMPTON CLASSIC STATEMENT OF HEALTH



The following requirements and recommendations have been drafted by the management of this horse show in consultation with our show veterinarian and the NY State Division of Animal Industry:

All horses being brought onto the grounds of the Hampton Classic Horse Show must be accompanied by a Statement of Health. As per GR844, at Federation licensed competitions, horse, more than 7 months of age, entering the grounds must be accompanied by documentation of Equine Influenza Virus and Equine Herpes Virus (Rhinopneumonitis) vaccinations within six months prior to entering the stables. Horses not in compliance with the rule may be required to leave the competition grounds upon request by Competition Management. Documentation should consist of of the following methods mentioned. The frequency of vaccine administration should be per the vaccine manufacturers' or veterinarian's recommendations. It is recommended that vaccines are administered by or under the direction of a veterinarian. In the case of vaccines administered by a veterinarian, the exhibitor, upon request by Competition Management, must provide documentation from the veterinarian on documenting that the horse in question received the vaccinations; name of the vaccines and date of vaccine administered.

The Statement of Health must be signed by a licensed veterinarian within 7 days of arrival at the Hampton Classic Horse Show:

The following horses have:

- 1. Been enrolled in a regular and consistent program of vaccination against EHV-4/1 with the most recent booster being within 180 days.
- 2. Not shown symptoms of or been treated for EHV-4/I within the past 28 days.
- 3. Not been exposed to any horses that have been treated for or shown symptoms of EHV-4/I within the past 28 days.

Name of Horse	Temperature	Date of Vaccine	Name of Vaccine
By checking this box, I attest that any ho	rse stated above l	has NOT been in a VS a	ffected state after August 13.
Any horse having been in VS affected states a the start of the competition and must organ			, .
declare that the horse(s) named above have bee shown no signs of infectious disease for the three authority to sign on behalf of the Trainer and/or Ag	(3) days preceding		
Vet Signature		Date of Arrival	
Trainer (print)	Trainer	(signature)	
Phone #	. Email		
Agent (print)	Agent (s	signature)	
Phone #	Email		

-Avoid nose to nose contact between horses from different stables.

Please be mindful of routine biosecurity measures to prevent any potential spread of contagious diseases.

-Avoid shared or communal water buckets.

Please feel free to contact our show veterinarian with any questions.