



**OWNER'S OR OWNER'S AGENTS' STATEMENT**

**Owner's/Agents Name:..... (Please delete one)**

**Address:.....**  
.....

**Tel:.....Mobile:.....**

**Email:.....**

**Horse's Registered Name:..... Paddock  
name:.....**

**Sire:.....Dam:.....Age:.....**

**Colour:..... Sex:.....Breed:.....**

**Brands: LS:           RS:           Microchip No#:.....**

**How long have you been acquainted with this horse?.....**

**How long have you had this horse under your personal care?.....**

**Do you have knowledge of any of the following?**

**Please indicate an answer to each question.**

- a. Past or present disease? Yes / No**
- b. Lameness? Yes / No**
- c. Accidents? Yes / No**
- d. Vices (Stable or ridden)? Yes / No**
- e. Abnormalities? Yes / No**
- f. Surgery? Yes / No**
- g. Medications (particularly recent, including intra-articular injections specifically)? Yes / No**
- h. Has the horse ever bled from the nostrils? Yes / No**
- i. Had the horse ever had signs of colic Yes / No**
- j. Is the horse a head shaker? Yes / No**
- k. Has the horse ever suffered from Ryegrass Staggers Yes / No**
- l. Any history of rhabdomyolysis (tying-up) Yes / No**

**Has this horse been examined by another veterinarian in the previous three months? Yes / No**

**If so, for what purpose?:**

**What use to which you understand the horse will be put? .....**

**Do you have any knowledge of past performance of this horse for the proposed use?**

**Is the horse in:**

**Training YES/NO or Spelling YES/NO**

**How long has the horse been in training?**

**Or Spelling?**

**Who is the horse's usual veterinary attendant?.....**

**Signature of Owner/Owners Agent .....**

**Name .....**

**Date: .....**