

NCTA Equine Biosecurity Submission Form

Circle one: student/staff/faculty/other	Name:		
Phone Number:			
Academic year/date:			
Current Boarding Location:			
Associated class/event: Circle one	<i>Basic Equitation</i> <i>Colt Starting</i> <i>Intermediate Training</i> <i>Advanced Performance Training</i> <i>Other</i> <i>N/A</i> <i>If other, please list:</i>		
Associated Team, if applicable: Circle one	<i>Rodeo Team</i> <i>Ranch Horse Team</i> <i>N/A</i>		
Are you bringing multiple horses?	Yes/No		
<i>If Yes, please complete the information below:</i>			
Horse Name	Owner	Associated Class/Team	Boarding Location
Attach the following to this submission: ****REQUIRED****	<ol style="list-style-type: none"> 1. <i>Copy of current negative Coggins</i> (current is within 1 year of today's date) 2. <i>Proof of current 5-way vaccination</i> (5-way defined: EWT, Flu, Rhino) 3. <i>Proof of current Rabies vaccination</i> (<u>Include date of administration for all</u>) <p>Acceptable proof includes (provide at least one):</p> <ul style="list-style-type: none"> ➤ Copy of vaccine receipt ➤ Signed note with horse/vaccination details from Vet (dates must be included) ➤ Copy of bill/invoice of vaccinations ➤ Signed Equine Health Certificate for NCTA Biosecurity Requirements 		
If from out-of-state, please include:	<i>Copy of current certificate of veterinary inspection (Health Certificate) and any other applicable requirements set-forth by the state of Nebraska</i>		

Equine Health Certificate for NCTA Biosecurity Requirements

Owner name: _____

Horse name : _____

Age of Animal: _____ Breed: _____ Sex: _____

Description of animal: _____

Vaccinated with a 5-way vaccine on (date) _____

Vaccinated for rabies on (date) _____

Proof of vaccination: Copy of receipt _____ or

**Veterinarian signature _____

Coggins (please attach a copy): Date _____ Accession # _____

By signing this you attest that the above information is true and correct.

_____ Date: _____

Please return completed form to NCTA attn. Jan Price.