Shepparton Agricultural Society Inc. PIC No.3SPHH260

BOER GOAT ENTRY FORM

BREED	CLASS NO.	EXHIBIT NAME	ENTRY FEE
		ENTRY FEES	
		Member's Ticket	
		TOTAL (Inc GST)	

NAME:_____

ADDRESS: _____

_____POSTCODE:_____

EMAIL:_____

PHONE:_____

Direct Deposit Details: Shepparton Agricultural Society Inc.

BSB:033-254 Account Number: 36-2109 Please include Surname for reference.

I declare the above entries to be my bona fide property.

This entry is made subject to the Rules and Regulations of the Society.

Names must be submitted or no Nominations taken.

Signed:_____

Date:_____

Shepparton Agricultural Society Inc. ABN: 17 868253115
PO BOX 6286 Shepparton Vic 3630 Email: sheppagsoc@gmail.com www.sheppshow.com.au
Phone: 03 58214677

NATIONAL GOAT HEALTH DECLARATION

Version 4, October 2016

SECTION 1 – CONSIGNMENT INFORMATION

Owner of goats: .....
(Full trading name)

Property/place where the journey commenced:.....
(Address)

.....
(Address continued) (Town/suburb) (Postcode) (State)

Property Identification Code (PIC) of this property ☐
This MUST be the PIC of the property that the stock are being moved from **Description of goats**

Number	Year born (Month)	Description (Breed, sex)	Brands or Earmarks
		Total	

Details of other statutory documents relating to this movement e.g. NVD

..../...../.....
(Document type) (Number) (Office of issue) (Expiry date)

SECTION 2 – JOHNE'S DISEASE (JD)

1. This consignment has an assurance rating of: (*refer and complete overleaf*)

   Section A..... **Section B**..... .....
   Consigning Herd Rating + **Risk Management Rating** = **TOTAL ASSURANCE RATING**

2. Were **all** these goats born on the above property? Yes ☐ No ☐
   If no, date introduced:...../...../.....
   Assurance rating of introduced goats at time of introduction:.....

3. Have goats with a lower assurance rating than the consigned goats been introduced into the herd in the last 2 years? Yes ☐ No ☐

   If yes, what was the lowest assurance rating of those introduced goats?.....

4. How many different sources of goats have been introduced to the consignor's property in last 2 years?

   None ☐ 1-5 ☐ 6 + ☐ Bucks only ☐

5. Are all the goats in this consignment from a GoatMAP flock? Yes ☐ No ☐

   Status:..... Expiry date:...../...../.....

SECTION 3 – FOOTROT

6. Have the goats in this consignment been observed for, and any suspect goats examined for, signs of **FOOTROT** during the past 14 days? Yes ☐ No ☐
7. To the best of your knowledge, are the goats in this consignment free from **VIRULENT FOOTROT**? Yes ☐ No ☐
8. To the best of your knowledge, are all sheep and goats on the consignor's property free from **VIRULENT FOOTROT**? Yes ☐ No ☐

SECTION 4 – OTHER HEALTH INFORMATION

9. Is the herd **CAPRINE ARTHRITIS ENCEPHALITIS (CAE) ACCREDITED FREE**? Yes ☐ No ☐
   Flock Accreditation No. ..... Expiry Date:...../...../.....
10. a. The goats in this consignment are derived from a herd which has had a whole herd negative test for **CAE** within the last 90 days. Yes ☐ No ☐

    OR

    b. The goat herd has undertaken a negative whole herd test in the last 12 months. Yes ☐ No ☐
    Date of last test: ...../...../..... Laboratory reference number:.....
11. To the best of your knowledge, are the goats in this consignment free from **LICE**? Yes ☐ No ☐

12. Treatments	Product	Date of last treatment
External Parasite Treatment		
Drench		
Vaccination other than JD (eg CLA)		
Other		

DECLARATION

I .....
(Full name)
as the owner and /or person responsible for the husbandry of the goats in this consignment, declare that the information in this statement is true and correct.

Signature* ..... **Date*** ...../...../20.....
*Only the person whose name appears above may sign this declaration, or make amendments which must be initialed.

SECTION A: Choose 1 Category in this section

Tick **only one** rating in this section and enter that rating at the bottom of Section A.

The herd from which the goats are consigned is:	**Assurance Rating**
In the GoatMAP with MN3 status	8 ☐
In the GoatMAP with MN2 status	7 ☐
In the GoatMAP with MN1 status	6 ☐
Not known infected and has no risk factors [1]	5 ☐
Not known infected, but has risk factors [1]	4 ☐
Restricted 2 status – RD2 [2]	3 ☐
Restricted 1 status – RD1 [3]	2 ☐
Infected but undertaking an approved Property Disease Management Plan[4]	1 ☐
Infected or suspected of being infected[5]	0 ☐
CONSIGNING HERD RATING SECTION A:	

SECTION B: Choose 1 Category in this section

Tick the number where applicable and add them at the bottom of Section B

The following management factors reduce the risk of Johne's disease in this herd:

The herd is not in the GoatMAP, but has had a Check Test [6] with negative results in the past 12 months	1 ☐
The consignment of goats are Approved Vaccinated Goats [7]	1 ☐
The consignment of goats has been reared under a nationally approved and independently audited kid rearing plan [8]	1 ☐
RISK MANAGEMENT RATING FOR SECTION B:	

TOTAL ASSURANCE RATING = A + B =.....

EXPLANATORY NOTES

1. **Risk Factors:**
   (a) The herd contains goats that were born or raised with dairy goats.
   The herd contains dairy breeds or dairy cross breed goats. *Exceptions are* goats that are from Goat MAP herds, or goats born and raised in WA.
   (b) The herd has grazed land in the past 5 years that is at risk of Johne's disease (JD) contamination. Land at risk of JD contamination includes land that is being grazed, or has been grazed in the preceding 12 months, by:
   - Dairy breeds or dairy cross bred goats, which are not sourced from GoatMAP herds.
   - Goat herds with RD2 or lower status.
   - Dairy cattle with a Dairy Assurance Score of less than 7.
   - Beef cattle, other than those in the CattleMAP, Johne's Beef Assurance Score 6 or greater.
   - Sheep other than SheepMAP flocks from areas without an audited Regional Biosecurity Plan which includes ovine Johne's disease.
2. **RD2:** A herd which has had a second negative herd test of all animals over 12 months of age in the herd, at least 2 years after RD1 status was achieved. This is part of an Approved Property Disease Management Plan approved by the Chief Veterinary Officer (CVO) of the jurisdiction.
3. **RD1:** A herd with a history of infection which has had 1 negative herd test of all animals over 12 months of age in the herd, at least 12 months after the last infected animal was removed from the herd. This is part of an approved Property Disease Management Plan approved by the CVO of the jurisdiction.
4. **Infected but undertaking an approved Property Disease Management Plan:** An infected herd that has not yet progressed to RD1 status but is complying with an on-farm disease control program combining elements of testing, kid rearing and biosecurity that has been approved by CVO of the jurisdiction.
5. **Infected or suspected of being infected:** Means infected or suspected of being infected with JD. Herds are no longer regarded as infected or suspected of being infected when a Property Disease Management Plan, which has been approved by the CVO of the jurisdiction, has been completed.
6. **Check Test:** A test of 50 homebred goats over 12 months of age in the herd (or all goats over 12 months of age in smaller herds) by serology or faecal culture or pooled faecal culture of 2 pools each of 25 goats, with negative results. The animals should be selected so as to increase the probability of detecting infection, i.e. older animals, animals in poor body condition.
7. **Approved Vaccinated Goat:** A goat that is:
   - Vaccinated with an approved JD vaccine by 16 weeks of age; or
   - Vaccinated with an approved JD vaccine after 16 weeks, when the flock
     - was in the GoatMAP, or
     - had undertaken a negative Sample Test by PFC in the 2 years preceding the vaccination; or
   - is identified as an Approved Vaccinate in accordance with State legislation.
8. **Nationally approved kid rearing plan:** A kid rearing plan designed to minimise the spread of JD in intensively managed herds, which has been documented and agreed by GICA and Animal Health Committee.