



Saffron Walden & District RIDING CLUB



TEAMS - FLU VACCINATION RULES

Please check your horse's certificate is valid (you will not be able to compete on any team if it is not) If you would like your flu vaccination double checked, please contact Suzannah Engelmann on 01799 527182 / suzannah@swdrc.co.uk

Valid Certificates – Vaccination Procedure

Each Horse must have a valid vaccination certificate, which undeniably relates to that horse, completed, signed and stamped on each line by a veterinary surgeon, who is not the owner of the animal. It must state that the horse has received two injections for primary vaccination against Equine Influenza given no less than 21 days and no more than 92 days apart. (Only these first two injections need to have been given before the horse may compete). In addition a first booster injection must be given no less than 150 days and no more than 215 days after the second injection of the primary vaccination. Subsequently, booster injections must be given at intervals of not more than 1 year apart, commencing after the first booster injection. None of these injections must have been given within the preceding 7 days, including the day of the competition or entry into the competition stables. Annual vaccinations may be given on the same date each year, but this is not recommended.

These diagrams must be completed. It must (along with the written description below) be sufficiently detailed to ensure positive identification of the horse/pony

Primary Vaccination

Secondary Vaccination

First Booster

Annual Boosters

Vaccinations have had to be completely restarted as annual booster was due before 20/09/00

'Name of Animal' must state horse/pony's competition name

This written description must be completed. It must (along with the description above) be sufficiently detailed to ensure positive identification of your horse/pony.

Certificate must be signed and stamped by a Veterinary Surgeon

VACCINATIONS		
Name of vaccine and Batch No.	Date	Vet. Surgeon's name & address
725746 COVIV ET	2-2-99	DR. C. G. WOODWARD 35 SOUTHGATE ST. SOUTHGATE SOUTHGATE
725741 COVIV ET	3-3-98	DR. C. G. WOODWARD 35 SOUTHGATE ST. SOUTHGATE SOUTHGATE
725741 COVIV ET	2-10-98	DR. C. G. WOODWARD 35 SOUTHGATE ST. SOUTHGATE SOUTHGATE
740303 COVIV ET	10-9-99	DR. C. G. WOODWARD 35 SOUTHGATE ST. SOUTHGATE SOUTHGATE
740303 COVIV ET	21/10/00	DR. C. G. WOODWARD 35 SOUTHGATE ST. SOUTHGATE SOUTHGATE
740303 COVIV ET	5/1/01	DR. C. G. WOODWARD 35 SOUTHGATE ST. SOUTHGATE SOUTHGATE
740303 COVIV ET	29/6/01	DR. C. G. WOODWARD 35 SOUTHGATE ST. SOUTHGATE SOUTHGATE
740303 COVIV ET	4/1/02	DR. C. G. WOODWARD 35 SOUTHGATE ST. SOUTHGATE SOUTHGATE

Colour GREEN Sex BLOOD Date of Birth 1992

Head 2 wounds, one either side of the line, of the same shape, clean, and extending into the neck. The wounds are situated on the neck, one on each side of the neck, one on each side of the neck, one on each side of the neck.

Identification procedure: The above identification must be completed by a Veterinary Surgeon. The description must agree with the description in the U.S.A. booklet. The description must agree with the description in the U.S.A. booklet. The description must agree with the description in the U.S.A. booklet.