

HIHEALTH HERDCARE CATTLE HEALTH SCHEME Application for Membership



Section A: Premises

section A. i ien	11363						
Full name of herd owner/manager				Trading Name:			
Full Postal Address:				•		Postcode:	
Tel:			Fax:		Email:	<u> </u>	
	(Please attach	a separat	e note if corresponden	ce is to be sent to a diff	ferent addres	s)	
UK Prefix:				Holding No:			
Vet Name & Practice:				Practice Address:			
Dunation Tal.	Γ						
Practice Tel:							
Practice Email:				Practice Postcode:			
Section B: Enter Detail of all stock on the		tock [Details				
			A - Dairy	B - Beef/Suckler		Total A & B	
Total number of anima	ls 1-2 years						
Total number of anima	ls >2 years						
Pedigree Breeds				- 1		ı	
All Health Schemes:		•					
Do you intend to keep a	ccredited and	non-accre	edited cattle on the ho	ding?		Yes	No
(If yes please p							
confirm that there are		_	•	•		Yes	No
Do you have a boundary				any neighbouring cattle out not required for BVI		Yes manitared fo	No
leptospirosis o			ted free programmes, t	out not required for BVI	o vaccinateu i	momtored n	iee,
Have you submitted any			oratory in the past yea	ar for testing for CHeCs	diseases?	Yes	No
(If yes please p			nd results)				
Do you vaccinate agains	t any of the fo	llowing?	BVD	IBR	Leptospi	rosis	Johne's
Johne's, Neospora and b	TB (and EL pla	ın) Health	Schemes only:				
Do you have a health pla	-			spora and/or bTB signed	d off		
by the herd's veterinary	surgeon (esser	ntial requi	rement of these progra	mmes)? Johne	e's	bTB	Neospora





Section C: Services

Please indicate by ticking the appropriate box below which membership option you wish to sign up to.

CHeCS herd health programmes (for BVD, Leptospirosis, IBR, Johne's and Neospora)

BVD Only (BVD testing and control)

Full (Eradication, monitoring and accreditation for the 5 diseases above)

bTB Membership (only or add on) requires the HHH bTB Programme Application form to be completed

Bulk Milk Monitoring Programme (3 bulk milk samples per annum including testing, milk pots and veterinary reporting)

(BVD, IBR & Leptospirosis CHeCS programme plus Johne's, Neospora, Liver Fluke and Ostertagia)

Section D: Declaration

BVD only, Full and Bulk Milk Programmes

- I wish to apply for membership of HiHealth Herdcare
- I certify the details on this form are, to the best of my knowledge, correct
- For the purposes of this scheme, I agree to all relevant information concerning the health of my herd being disclosed by my veterinary surgeon to the scheme organisers
- Any such information will be treated as confidential
- I agree to adhere to all CHeCS rules as stipulated in the CHeCS technical document
- I agree to copies of all reports being sent to my veterinary surgeon
- I agree to my herd information being shared with CHeCS for auditing purposes
- I understand that my herd details will be added to the online HiHealth Herdcare membership database.

If you **DO NOT** wish your herd to be displayed on the database please tick here.

Signature	Date	
Owner/Manager (Delete as appropriate)		
Signature	Date	
Veterinary Surgeon		
Please detail how you heard about HiHealth Herdcare:		

Lundertake to nay all fees nayable under the HiHealth Herdcare cattle health scheme and understand that failure to do so may result in the