

**2014**



# **Murray Grey National Show & Sale**

**WODONGA EXHIBITION CENTRE**

**27<sup>th</sup>, 28<sup>th</sup> & 29<sup>th</sup> APRIL 2014**

**Please find the 2014 Online National Entry form attached to the  
following link:**

<https://adobeformscentral.com/?f=9g-wEPdyomW9bteakY1kA>

**ENTRIES CLOSE - 17<sup>th</sup> JANUARY 2014**

**This file contains all documentation that should be printed and filled out and dates when all forms need to be supplied by.**

Before starting your online entries, please have the following details ready:

- Contact name, number, email, vendor name & stud prefix for catalogue
- Animal Ident
- Member Ident
- D.O.B
- Agent, Led/Unled, Sex
- BJD Status – MN1, MN2, MN3, Beef Only, Free or No status
- BJD Area - Protected, Beef Protected, Management, Free (if you are unsure, please refer to following link <http://www.animalhealthaustralia.com.au/programs/johnes-disease/bovine-johnes-disease-in-australia/>)
- Sale Notes – Vaccination details, joining dates, joining/calf sire, calf D.O.B, sex, colour

Below is an Entry requirement checklist for your own records, use it to double check you have supplied & submitted all necessary details.

Entry Requirement Check List	Supplied	Final Date for Submission
Completed Entry Forms – Online or via Phone		17 Jan 2014
<p>The following needs to be supplied via the post to the following address:</p> <p><b>Mr Roger Houghton</b>  <b>P.O. Box 2274</b>  <b>Bowral, NSW, 2576</b></p>		
Cattle Herd Health Status Declaration		15 March 2014
Copy of Certificate of Currency for your Public Liability Insurance - stating Australia Wide Coverage		15 March 2014
Signed Waiver Forms		15 March 2014
Pestivirus Testing Results for all lots		15 March 2014
AACV Bull Examination Certificate (optional)		15 March 2014 or later by arrangement
Female Pregnancy Test Certificates		15 March 2014 or later by arrangement
<p>Tail hair should be pulled and sent to the respective laboratories <b>prior to the 1<sup>st</sup> of February 2014</b> to ensure data on file with society by 15<sup>th</sup> March. These results do not need to be forwarded to Roger.</p>		
DNA & CA Bull Testing: - Sale Lots		15 March 2014
- Joining Sires		15 March 2014
<b>CA testing for FEMALE lots (new 2014 requirement)</b>		15 March 2014
Payment of entries & advertising to society		31 March 2014

**MURRAY GREY BEEF CATTLE SOCIETY ("the society")**  
**NAME OF EVENT: 2014 National Show and Sale**  
**DATES/DURATION OF EVENT: 27<sup>th</sup>, 28<sup>th</sup> and 29<sup>th</sup> April 2014**

**Event Participant - Waiver, Release and Acknowledgement Form**

In this Waiver, Release and Acknowledgement Form "the Society" means and includes all affiliated entities; servants or agents of the Society, all employees of the Society, all members of the Society and all volunteers of the Society and/or all affiliated entities.

By participating in the Event:

1. I acknowledge that it is a condition of participating in the Event that I do so at my own risk. I accept all risks and release the Society from all claims, demands and proceedings arising out of or connected with my participation in the Event and indemnify them against all liability for any injury, loss or damage arising out of or connected with my participation in the Event. This release continues forever and binds all of my heirs, successors, executors, personal representatives and assigns.

2. I acknowledge that it is a condition of participating in the Event that the Society and any person or body directly or indirectly associated with the Event are absolved from all liability arising for injury or damage to myself or my property howsoever caused arising out of my participation in the Event whatsoever whether due to any negligent act, breach of duty, default and/or omission on the part of the Society and any person or body directly or indirectly associated with the Event, or otherwise.

3. I acknowledge that participating in the Event may involve a risk of serious injury or even death. I accept all risks necessarily flowing from participating in the Event.

4. I acknowledge that the Society relies on the information provided by me and state that all such information is accurate and complete.

5. I warrant that I am physically fit to participate in the Event and that I have not been advised otherwise by a qualified medical practitioner. I acknowledge that I must disclose any pre-existing medical or other condition that may affect the risk that either myself, or any other person will suffer injury, loss or damage.

6. I consent to receiving any medical treatment including ambulance transportation that the Society and any person or body directly associated with the Event think desirable as required during the event.

7. I acknowledge that it is a condition of participating in the Event that I follow the instructions of the Society and any person or body directly or indirectly associated with the Event at all times. I indemnify and keep indemnified the Society and any person or body directly or indirectly associated with the Event from all claims, demands and proceedings arising out of or connected with a failure by me to comply with rules and/or directions given to me by the Society and any person or body directly or indirectly associated with the Event.

Signature : \_\_\_\_\_ Date: \_\_\_\_\_

Print name in full \_\_\_\_\_

Address : \_\_\_\_\_

Phone number: \_\_\_\_\_

**MURRAY GREY BEEF CATTLE SOCIETY ("the society")**  
**NAME OF EVENT: 2014 National Show and Sale**  
**DATES/DURATION OF EVENT: 27<sup>th</sup>, 28<sup>th</sup> and 29<sup>th</sup> April 2014**

**Event Participant - Waiver, Release and Acknowledgement Form**

In this Waiver, Release and Acknowledgement Form "the Society" means and includes all affiliated entities; servants or agents of the Society, all employees of the Society, all members of the Society and all volunteers of the Society and/or all affiliated entities.

**DECLARATION OF MINORS – UNDER 18 YEARS OF AGE**

If you are under the age of 18 years on the Event Day your parent or guardian must sign this declaration.

I certify that I am the parent/guardian of \_\_\_\_\_ who will be \_\_\_\_\_ years of age on the day of the Event and that he/she has my consent to participate in the Event. I testify that I have read the above and acknowledge acceptance of the stated conditions on behalf of the minor specified above.

In consideration of the facilities provided to us, I myself, my executors, administrators and assigns and for the child/children/under age person/s (if applicable) absolutely release and discharge the Society and any person directly or indirectly associated with the Event from all claims, demands and proceedings arising out of or connected with participation in the Event that I or the child/children/under age person/s may suffer or sustain

Signature of parent/guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Print name in full: \_\_\_\_\_

I ACKNOWLEDGE THAT I HAVE READ THIS FORM OR THAT IT HAS BEEN EXPLAINED TO ME. I FULLY UNDERSTAND ITS TERMS AND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT. I HAVE SIGNED THE DOCUMENTS FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Names of additional minors: \_\_\_\_\_ Age \_\_\_\_\_  
\_\_\_\_\_ Age \_\_\_\_\_  
\_\_\_\_\_ Age \_\_\_\_\_  
\_\_\_\_\_ Age \_\_\_\_\_  
\_\_\_\_\_ Age \_\_\_\_\_

# NATIONAL CATTLE HEALTH STATEMENT

VERSION 1  
August 2012

Consignment PIC Number (must be completed):

Attached to accompanying NVD / Waybill No:

## SECTION 1 – Consignment Information

(must comply with the information provided on an NVD, if attached)

Owner of cattle: .....

Phone number: .....

Address of origin of stock: .....

.....

Destination Property Identification Code (PIC) (if known): .....

Description of cattle (e.g. breed, sex & type): .....

.....

Were all the cattle vendor-bred on the above property: Yes ☐ No ☐

## SECTION 2 – Johne's Disease Beef Cattle (see explanatory notes for further information)

The cattle originate from the following BJD Zone/Area:

Protected Zone ☐ Free Zone ☐ Beef Protected Area ☐ Management Area ☐

The cattle originate from a herd with a status of:

Infected ☐ Suspect ☐ Non-Assessed ☐ Check Tested ☐ Beef Only ☐

Tested to MAP Standard ☐ Tested 4yo ☐ MN1 ☐ MN2 ☐ MN3 ☐

Beef Protected Area beef cattle (non-assessed) eligible for the Protected Zone ☐

## SECTION 3 – Johne's Disease Dairy Cattle (see explanatory notes for further information)

The consignment has a Dairy Assurance Score of:

Part A (herd base score)..... Part B (calf credits)..... Part C (total Dairy Score).....

## SECTION 4 – Enzootic Bovine Leucosis (EBL) (see explanatory notes for further information)

EBL test result for animals being moved: .....

Date of test: ..... / ..... / .....

Are the cattle from an EBL accredited or certified free herd: Yes ☐ No ☐

## SECTION 5a – Treatments (see explanatory notes for further information)

Treatments	Product	Date of treatment within last 6 months
Lice treatment		
Drench		
Liver fluke treatment		
Other treatments (type)		
Comments (optional)		

## SECTION 5b – Current Vaccinations (see explanatory notes for further information)

Clostridial vaccination (e.g. 5 in 1): Yes ☐ Clostridial vaccination (Botulism): Yes ☐

Pestivirus vaccination: Yes ☐ Bovine ephemeral fever vaccination: Yes ☐

Leptospira vaccination: Yes ☐ Vibrio vaccination: Yes ☐

Other Vaccinations (specify): .....

## SECTION 5c – Pestivirus Testing (see explanatory notes for further information)

Have these cattle been tested for the presence of pestivirus antigen (in blood, skin or hair)? Yes ☐ No ☐

If tested, were any cattle positive for pestivirus antigen? Yes ☐ No ☐

If tested, were the cattle found to be persistently infected? Yes ☐ No ☐

Other (specify): .....

## SECTION 6 – Declaration (see explanatory notes for further information)

As the owner/person (please circle) responsible for the husbandry of the cattle in this consignment, I declare that the above information in this statement is true and correct.

Signed: ..... Name: .....

Date: ..... / ..... / ..... Phone no: ..... Address: .....

Persons making false statements may be liable under fair trading and other relevant State legislation.

## SECTION 7 – Cattle Tick (see explanatory notes for further information)

I .....  
(full name of inspector or authorised person)

☐ Declare that the stock described above are from a non restricted property in a cattle tick free area OR

☐ Declare that the stock described above comply with the cattle tick entry requirements for..... OR  
(states)

☐ Where treatment and/or inspection was required the following inspection and/or treatment

was undertaken: Type of inspection: .....  
(clean inspection and/or supervised)

Treatment: ..... Method of treatment: .....  
(chemical) (plunge dip – spray – pour on – injection)

Signature: ..... Designation: .....

Date: ..... / ..... / ..... Phone no: ..... Location: .....

## SECTION 8 – Certification by an Authorised Person (to be completed for intrastate or interstate movements only where required) (see explanatory notes for further information)

According to the information provided above, and after due investigation of jurisdictional records by me, I certify that the health status of the consignment of cattle described above complies with the jurisdictional requirements pertaining to.....  
(destination State/Territory)

Signed: ..... Name: .....

Date: ..... / ..... / ..... Phone no: ..... Location: .....

# CATTLE HEALTH STATEMENT EXPLANATORY NOTES

VERSION 1  
August 2012

**PLEASE NOTE:** It is law in all States/Territories for all cattle to be identified with NLIS devices before being moved. It is the owner/receiver of the cattle at the destination (unless purchased at a saleyard) who is required to send the necessary NLIS information to the NLIS database.

This is a voluntary form however, those owners planning to move cattle interstate should check that state's requirements and contact the local animal health officer to obtain any additional paperwork.

## INSTRUCTIONS FOR USE

Consignor - complete all relevant sections and SIGN at section 6

Authorised Person - complete all relevant sections and SIGN at section 7 & 8

- Beef cattle sections 1, 2, 4, 5, 7
- Dairy cattle (all cattle born on a dairy farm) sections 1, 3, 5

## SECTION 2 – Johne's Disease Beef cattle

### BJD Zones/Areas

The accompanying map shows the BJD zones in Australia. For more information, go to [www.bjdaware.com.au](http://www.bjdaware.com.au)

### Beef Only Herds

Beef cattle are all cattle except those born on a dairy farm. For a herd to be eligible as Beef Only, it must meet ALL the following criteria:

- The cattle are from a beef herd that has not grazed with dairy cattle, or first generation dairy-cross cattle, at any time during the past five (5) years, unless those cattle were from a herd enrolled in the CattleMAP.
- The cattle are from a beef herd that has not, **at any time in the past**, grazed on land that had been grazed by adult dairy cattle (two years or older) during the 12 months before the arrival of the beef herd, unless those dairy cattle were part of a CattleMAP herd.
- If introduced into the herd or onto the property(s) in the past five (5) years, the cattle are from herds of the same *Beef Only* or higher status. This must be supported by a completed National Cattle Health Statement or a signed BJD Vendor Declaration. Without these declarations, you **cannot** claim *Beef Only* status for any cattle sold from the herd.
- The cattle do not include animals that have been part of a herd classified as Infected (IN), Suspect (SU) or Restricted (RD), according to the National Johne's Disease Standard Definitions and Rules and Guidelines (SDR&Gs) for Johne's Disease in Cattle.



### Tested to MAP Standard (TMS)

A herd Tested to MAP Standard (TMS) is one that does not have an assessed status but which has undergone testing on the herd equivalent to a Sample Test under a MAP program in the last 24 months with negative results.

### Tested Four Years Old and over (T4YO)

A herd Tested Four Years Old and over (T4YO) is one in which cattle aged four years old and over have been tested in accord with sample sizes in the Testing strategies section of the CattleMAP program.

### Beef Protected Area beef cattle (non-assessed) eligible for the Protected Zone

A beef herd in the Beef Protected Area that, in the past five years, has not introduced dairy cattle or dairy-cross cattle, or grazed on land used by dairy cattle, unless the dairy cattle concerned had a CattleMAP status of MN1 or better.

*Note: Cattle from the Management Area are only eligible for the Protected Zone if they have an MN1 status or above in the CattleMAP, or are Beef Only.*

## SECTION 3 – Johne's Disease Dairy Cattle

Johne's disease herd status information about Dairy Assurance Score calculation is available at [www.dairyaustralia.com.au/bjd](http://www.dairyaustralia.com.au/bjd)

## SECTION 4 – Enzootic Bovine Leucosis (EBL)

All cattle entering Tasmania must meet at least **ONE** of the following criteria:

- Cattle have been tested for Enzootic Bovine Leucosis with the ELISA test within 42 days before shipment with negative results and evidence supplied via an attached laboratory report. If samples were pooled, no more than 10 sera or 30 milk samples were combined in each pool. Unweaned calves less than 12-weeks-of-age transported with their dam do not require testing for EBL; *OR*
- Dairy cattle from a registered dairy herd must be accredited as Monitored Negative (MN) or better, according to the national guidelines for Enzootic Bovine Leucosis Control; *OR*
- Beef or beef-cross breeds must come from herds in Victoria, South Australia, Western Australia (*excluding the cattle tick infected area*), New South Wales (*excluding North Coast Livestock Health and Pest Authority District*), or Queensland (*excluding the cattle tick infested area*). The herd of origin must have been in existence for at least three (3) years with no evidence of Enzootic Bovine Leucosis infection in the last three (3) years.

## SECTION 5A, 5B AND 5C – Treatments, Current Vaccinations and Testing

### Treatments

- Provide details on any cattle treatments, vaccinations and management procedures within the last six (6) months. Some manufacturers include more than one of the categories listed below in the same vaccine, known as a *combination vaccine*. If you use a *combination vaccine*, each agent(s), as appropriate, should be detailed.
- For vaccinations to be current, you must have followed the manufacturer's recommendation for vaccination. Typically, young animals or first time vaccinated animals need two (2) doses, followed by annual boosters. As variations to this general rule do occur, you must use the manufacturer's recommendations.
- At the date the declaration is made, the animals must be considered protected from the diseases listed.

### Current Vaccinations

- A Clostridial 5-in-1 vaccine provides protection against tetanus, blackleg, black disease, pulpy kidney (enterotoxaemia) and malignant oedema.

### Testing

- Persistently infected animals can be detected by conducting a pestivirus antigen test. This test only needs to be conducted once in an animal's life. Cattle that test positive in most cases are persistently infected animals. Contact your veterinarian for assistance in understanding the test results or go to [www.bvdaustralia.com.au](http://www.bvdaustralia.com.au).

## SECTION 6 – Declaration

- This section must only be completed by the owner or person responsible for the husbandry of the cattle in the consignment.
- The original is to be attached to the National Vendor Declaration (NVD) form accompanying the cattle. The duplicate remains with the vendor.

## SECTION 7 – Cattle Tick

Parts of Queensland, Northern Territory and Western Australia are declared under the relevant state legislation as Cattle Tick Infected Zones. All other parts of Australia are Cattle Tick Free Zones. Section 7 is mandatory for cattle moving:

- From an Infected Zone unless to another Infected Zone
- From a property in the Free Zone with cattle tick infestation
- Between some states (please check with the local animal health officer).

## SECTION 8 – Certification by an Authorised Person

- This section must be signed by an authorised person if required for intrastate and interstate movements (please check with your local agriculture department or on departmental websites for this information).
- Some states require testing or certification additional to that outlined in this document. Please check the entry requirements for any interstate movements at [www.animalhealthaustralia.com.au/programs/johnes-disease/disease-movement-requirements-for-stock/](http://www.animalhealthaustralia.com.au/programs/johnes-disease/disease-movement-requirements-for-stock/)

**NOTE: The Cattle Health Statement is a legal document- Please read carefully before signing.**