Equine Health Form for Visiting Horses at UConn

To be completed by owner/trainer/agent.

Name (printed) ___________________  Name of Horse ___________________
Address ___________________________  Breed _______ Age _______ Sex _____
                                          ___________________________  Color ______________
Phone ____________________________

Temperature Log (must be completed for three days prior to arrival on campus)

Day 1: _______  Day 2: _______  Day 3: _______
                        _______          _______          _______

-Coggins: This horse has been tested for equine infectious anemia within 1 year prior to entering the UConn Campus. The test result statement needs to be presented to management or designee.

-Rabies: This horse has been vaccinated for rabies no sooner than 28 days and no later than 1 year prior to entering the UConn Campus.

  Date vaccinated: ____________

-Eastern/Western/West Nile Virus/Tetanus/Flu/Rhino needs to be given within 1 year prior to entering UConn Campus.

  Date vaccinated: ____________

-Flu/Rhino Booster- This horse has been given a booster for Flu/Rhino no later than 6 months prior to entering the UConn Campus.

  Date vaccinated: ____________

Horse Owner Name (print): ________________________________

Horse Owner’s Signature: __________________________________

Proof of current Coggins and Veterinary Vaccination Record required.

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Adm/hs/forms/EquineHealthFormforVisiting.doc