Poultry Gathering - Participant Declaration Form

Event:
Title: Name: Surname:
Address:
Postcode: CPH number (if available):
Address of birds (if different from the above):
Phone: Mobile:
Email:
Number of entries:
Chickens: Ducks: Geese: Turkeys: Eggs:
Other (please specify): Number:
In signing below, I declare that:
 I have read and will comply with the biosecurity information provided The birds entered have not been in contact with any notifiable avian disease agents and do not show any signs of Avian Influenza The place of origin of the birds entered (above) is not from an area of the UK which is under restrictions relating to notifiable avian disease (including Protection and Surveillance zones) imposed by Ministers I accept full responsibility for my own birds during the poultry gathering.
Signed: Date:

The collection of this information is covered under legal obligation to prevent notifiable avian disease within the UK and it will be stored and used for this single purpose for a minimum of three months.