

**EQUINE EHV-1 VACCINATION CERTIFICATION**

ALL horses entering Kent School Stables (“Stables”) property must submit this certification statement **PRIOR** to entering the Stables property. This certification form should be submitted to the show secretary of the event(s) you are attending with your entry. **Section A** of this certification must be signed by a licensed veterinarian **OR** an invoice clearly identifying the Equine EHV-1 vaccination with a veterinarian’s signature or office stamp will be accepted. **Section B** of this certification is the Owner/Riders responsibility and **must be completed**, please read this Section in its entirety before signing.

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**SECTION A - Vaccination Statement:**

This horse, \_\_\_\_\_, has been vaccinated for Equine EHV-1 (either modified live or killed vaccine) no later than 90 days prior to arriving on the Kent School Stables property. Date vaccinated \_\_\_\_\_.

**Name of Vaccine:**

\_\_\_\_\_ Rhinomune    \_\_\_\_\_ Prodigy    \_\_\_\_\_ Pneumabort K    \_\_\_\_\_ Calvenza  
\_\_\_\_\_ Other. Vaccine serial # and date \_\_\_\_\_.

\_\_\_\_\_  
Signature of Licensed Veterinarian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name of Veterinarian

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**SECTION B - No Known Exposure:**

This horse, \_\_\_\_\_, has not been in contact with any other horse(s) which have tested positive for the EHV-1 virus via PCR of nasal swabs and buffy coat, nor has it come from a stable which has been under quarantine due to the presence of a positive EHV-1 horse(s) for the past 30 days. This horse has not been handled by persons in contact with a positive EHV – 1 horse(s) for the past 30 days. This horse has not had a temperature above 101.5 for the past seven days. If this horse is exposed or his temperature rises after submitting this certification I will notify the show secretary immediately.

\_\_\_\_\_  
Signature of Owner/Rider

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name of Owner/Rider