



## Strategic Worming - Registration Form

### Client details

Title - Mr / Mrs / Ms / Miss / Dr      First Name: .....      Surname: .....

Address: .....

.....

Postcode: .....

Mobile number: .....

Email address: .....

WEC results will be emailed to the address above. If you would prefer to be contacted by phone please tick here

### Horse details

Name: .....      Sex: M / F / G

Age: .....      Breed: .....      Height: .....

Use: .....      Approx. Weight (kilos): .....

Horse kept at home address? Yes / No      Address (If no): .....

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### Worming history

Date last wormed: .....      Wormer used: .....

Date of previous Worm Egg Count (if applicable): .....      Result: .....

Does your horse have shared grazing? Yes / No

If Yes are all horses to be on OVH Strategic Worming Plan? Yes / No

Will the field also be grazed by cattle / sheep / other animals? Yes / No

Do you poo pick? Yes / No      If yes how often? Daily / 2 or 3 times per week / weekly

Any other comments? .....

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