

## **Program Enrollment Form**

This is to state that I (we)

Contact 1: Last name	First name			
Contact 2: Last name	First name			
Farm name				
Address				
City	Province	Postal code		
Location of flock if different from above				
Phone	Cell phone			
Email				

Agree to participate in the **Ontario Maedi Visna Flock Status Program (OMVFSP)** and agree to adhere to the following conditions:

- a) All sheep and goats residing on my farm must be **uniquely and permanently identified** as defined by the OMVFSP protocols.
- b) Have all sheep and goats residing on my farm blood sampled by a veterinarian licenced to practice in the province in which my flock resides or a registered veterinary technician under the veterinarian's direction, as defined by the OMVFSP protocols.
- c) Promptly act on the results of the MV test as defined by the OMVFSP protocols. Protocols are posted at <a href="https://www.OntarioSheep.org">www.OntarioSheep.org</a>.
- d) Meet and maintain all biosecurity requirements on my flock as defined by the OMVFSP protocols.
- e) Agree to promptly pay, to OSF, the testing costs as assessed by the Animal Health Laboratory, University of Guelph.
- f) All individual farm results of the OMVFSP will be kept confidential.
- g) Participating producers in good standing have an option to be listed on the Ontario Sheep Farmers website and quarterly in the Ontario Sheep News. If you would like to be included on these listings you will need to fill out the MV Program Publication Listing Consent Form.

We wish to enroll the flock in the	(please check one)
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○ Whole Flock Program	<ul> <li>Monitored Flock Program</li> </ul>
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## Please answer the following questions about your sheep flock1:

Number of ewes and rams >365 days of age (1 year) in the flock		
Number of ewes and rams $\geq$ 180 days of age and <365 days of age in the flock		
Do you ever bring new sheep into your flock (rams, ewes, lambs)?	Yes	○No
If yes, how often do you bring new sheep into your flock (times per year)?		
Do you have any goats on the premises?	Yes	○ No

Please include the name of your flock veterinarian/clinic that will be carrying out the OMVFSP testing. We will forward protocols and forms to this address in preparation for your initial qualifying test.

Veterinarian's name					
Veterinary clinic name					
Address					
City	Province	Postal code			
Phone	Cell phone				
Fax					
Email					

Please mail or email your enrollment form to: OMVFSP Coordinator, Ontario Sheep Farmers 130 Malcolm Rd Guelph, ON N1K 1B1

E: admin@ontariosheep.org

 $<sup>^{1}</sup>$  A flock is a group of sheep that are managed together at any time of the year. E.g. breeding, pasturing, in a feedlot, etc.