

# Quail Farm Visitor Entry

## Biosecurity Declaration

Full Name

Company/Organization

Date of Visit

Contact Number

Purpose of Visit

Last Farm/Farm Facility Visited (name, location)

Date of Last Visit to Another Farm

In the last 48 hours, have you visited any other poultry or bird facilities?

☐

Yes

☐

No

Are you bringing any equipment or tools onto the premises?

☐

Yes

☐

No

If yes, please specify:

Declaration: I declare that the above information is correct and that I will comply with the farm's biosecurity protocols.

Signature

Date