



Please stick a BCMS Holding Sticker here

No Sticker. See overleaf

PREMIUM CATTLE HEALTH SCHEME Application for Membership

Please return completed form to: Premium Cattle Health Scheme, SAC Consulting Veterinary Services, Greycrook, St Boswells, Roxburghshire, TD6 0EQ

Please do not send a cheque: you will be invoiced.

For the purposes of the scheme a herd is defined as cattle that are under a unified management system not necessarily on one premise.

Information on this form will be stored and processed on computer. SAC Consulting complies with the standards set by The Data Protection Act 1984.

1	Name of herd owner					
	Surname		Title		Initials	
2	Full postal address to which we should send correspondence					
		Postcode				
		Tel:	Fax:			
		Email:				
	Breed/s of Cattle					
3	Name of herd age	Name of herd agent or manager if appropriate				
	Surname		Title		Initials	
4	Full postal address if different from above	Postcode				
		Tel:	Fax:			
5	<u>.</u> 1					
5	Address where herd kept					
	(If this is the same as in 2 or 3, write "as in 2" or "as in 3" as	Postcode Tel:	Fax:			

6	Veterinary Practice Details					
	Full postal address and contact details	Postcode				
		Tel: Fax:				
DECL	ARATION & AUT	HORISATION				
		rship of the Premium Cattle Health Scheme (PCHS) which is operated by SAC Consulting. I certify is form are to the best of my knowledge correct.				
		theme, I agree to all relevant information concerning the health of my herd being disclosed by my S. This information will be treated in confidence.				
I have	read and undertake	to comply with the rules of the scheme.				
		r their agents may inspect my herd, the premises and the herd records in order to verify compliance at the evidence of failure to comply may result in the loss of my herd status.				
		of the scheme and the level or method of charging, and shall have the right to terminate the scheme. om the scheme at any time but, if I do, no part of my fees will be refunded.				
secure	as we have 'read o	attle Movement Service (BCMS) data to produce barcoded labels for sample testing. Your data is nly' access to your records. If you do not wish us to access your data please let us know. Please note charge for label production where BCMS data is not used.				
		le details of my stock and my telephone number on a database to be used in connection with sale of k. (delete if you do not wish to be included in the database)				
with th	e practising veterin	at the PCHS is organised and supervised by the Veterinary Services of SAC Consulting in partnership lary surgeon. Where the veterinary practitioner is unable to provide consultancy there will be an the PCHS client manager.				
Please	e let us know how y	you heard about PCHS/ What prompted you to join?:				
•••••						
Signat	ture	Date				
Ownei	r/manager (delete a	s applicable)				
Please	e remember to sticl	k your BCMS holding number on the front page.				
If you	do not have a stick	ker please write your holding number here:				