

HerdAdvance

Expression of Interest Form

Submission Deadline:
4 November 2019

Contact details

Customer Reference Number (CRN)

Title

First name

Surname

Business name

Email address

Farm name or house number

Phone number

Address line 1

Mobile number

Address line 2

Address line 3

Village/Town

County

Postcode

I wish to be considered to participate in AHDB HerdAdvance and I agree to the collection and retention of my personal information and farm details on this form for my application to be assessed and administered. I also agree that these details can be used by AHDB to update the contact and farm information that it already holds on me or to add me to that list in order to inform me about other ways in which I can engage with and benefit from the work funded through this project as well as through my levy.

I understand that all data collection and retention will be in accordance with best practice, and I have read the AHDB Privacy Notice (www.ahdb.org.uk/PrivacyNotice) which explains how AHDB uses and takes care of my data.

Signed

Print name

Date

Your farm

Do you have any other of the following enterprises? (Please tick all applicable)

Beef

☐

Sheep

☐

Dairy systems

Cow numbers

Milk production – annual litres

Please tick all applicable

☐ Conventional

☐ Organic

☐ Spring Block Calving

☐ Autumn Block Calving

☐ AYR Calving

No. of days grazed (Annual)

No. of days housed (Annual)

☐ Robotic Milking

☐ 1 x day Milking

☐ 2 x day Milking

☐ 3 x day Milking

☐ Closed Herd

☐ Flying Herd

☐ Other

Milk Contract Details			
Who do you sell your milk to?			
Do you have a milk recording contract?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If 'yes', with which company?			
Please tick all applicable			
Do you currently test for?	Individual milk testing	Bulk milk testing	Blood sample testing
Johne's	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BVD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lepto	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IBR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Neospora	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you use Herd Genetic Reports?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you implement a Johne's Management Plan?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

Veterinary Details	
Vet practice name:	
Vet practice address:	
Vet's name:	

Please send responses by 4 November 2019 to:

HerdAdvance,
AHDB,
Stoneleigh Park,
Kenilworth,
Warwickshire
CV8 2TL

For more details on the eligibility criteria please see the enclosed leaflet or visit: ahdb.org.uk

