



COUNTY FAIR HORSE AFFILIATION

Affiliation fee is \$25.00 per person per year

If a member joins the affiliation in July, he/she renews membership by paying again in July for the new year. No exceptions will be made.

Please contact Debbie Hunt at **(813)230-0771** by phone or text to check availability of the arena and to schedule a time for use.

Name: -----*

Address: -----

City: ----- State: ----- Zip: -----

Phone: ----- Email: -----

Please include below a name and number to contact in case of emergency:

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Name	Number

Warning – Under Florida law, an equine sponsor, or equine professional is not liable for an injury to or the death of a participant resulting from inherent risks of equine activities.

I agree to Hold Harmless the Greater Hillsborough County Fair Inc., its officers, representatives and directors, the County Fair Horse Affiliation, and the BOCC of Hillsborough County from any and all claims, actions and judgements including all costs of defense and fees incurred in defending against same, arising from or related to use of arena and facilities on fairgrounds.

Signature

Date

*

If minor, parent must sign.



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Key Carrier Form

Key Carrier: Person in charge of the arena/grounds use at the Hillsborough County Fairgrounds. He/she is responsible for gates to be closed upon leaving, lights turned off if used, and the arena and grounds being left per requirement: Arena should be cleaned of any litter including balloons and brass if your group is involved in mounted shooting practice. Arena should be drug after use and left ready for next group. If bathrooms are used make sure toilets are flushed and litter is placed in cans. Any injuries, incidents or accidents should be reported immediately to fair office (813)737-3247 or Debbie Hunt (813)230-0771.

Failure to comply could result in you/your group no longer having access to the Arena.

Name of Key Carrier: _____

Phone: _____ Email: _____

Affiliate group, club or organization: _____

* * *

Date Used: _____ Time: _____

Number of riders in group: _____ Total collected: \$ _____

Any Injuries? Please include personal or equine: Yes: _____ No: _____

(If yes explain in comment section.)

Any repair or damage to equipment? Yes: _____ No: _____

(If yes explain in comment section.)

Arena drug? _____ Bathrooms checked? _____

Money collected given to: Fair office: _____ Debbie: _____ Drop Box: _____

Comments: _____
