

WORLD ATHLETE ENTREPRENEUR (WAE) SIDEPOT

Draw _____ Time _____

Name _____

Horse's Name _____

Email _____

Would you like to be placed on the WORLD ATHLETE ENTREPRENEUR emailing list?? Y or N

In accepting this entry, the applicant hereby releases and discharges the Florida Equine Athlete, all officers, personal representatives, employees, agents, Melissa Greer Ph.D., host arenas/producers, arena owners, and family members from liability, loss, claims, damages, and/or expenses for injuries or death to person, animal, property, family member(s), friends, or anyone affiliated with applicant, reputations, or financial conditions as a results of, or in any way, relating to applicant's participation or nonparticipation in WAE sanctioned event, whether caused by negligence, arena conditions, and/or by the conduct of the Florida Equine Athlete or arena hosts, owners, officers, etc.

Signature (Parent/Guardian must sign for minor) DATE _____

WAE MEMBER _____ NONMEMBER _____

WORLD ATHLETE ENTREPRENEUR SIDEPOT

Draw _____ Time _____

Name _____

Horse's Name _____

Email _____

Would you like to be placed on the FEABRA emailing list?? Y or N

In accepting this entry, the applicant hereby releases and discharges the Florida Equine Athlete, all officers, personal representatives, employees, agents, Melissa Greer Ph.D., host arenas/producers, arena owners, and family members from liability, loss, claims, damages, and/or expenses for injuries or death to person, animal, property, family member(s), friends, or anyone affiliated with applicant, reputations, or financial conditions as a results of, or in any way, relating to applicant's participation or nonparticipation in WAE sanctioned event, whether caused by negligence, arena conditions, and/or by the conduct of the Florida Equine Athlete or arena hosts, owners, officers, etc.

Signature (Parent/Guardian must sign for minor) DATE _____

WAE MEMBER _____ NONMEMBER _____