Event	Draw	_ Time	# of Exhibitions
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, 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 FEABRA sanctioned event whether caused by negligence, arena conditions, and/or by the conduct of the Florida Equine Athlete or arena hosts, owners, officers, etc.

			DATE	
Signature (Parent/Guardian must	t sign for minor)			
FEA MEMBER	NONMEMB	BER		
Event	Draw	Time	# of Exhibitions	
Name				
Horse's Name				
Email		Would you like	to be placed on the FEABRA emailing list?	?Y or N

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FEA MEMBER \_\_\_\_\_ NONMEMBER \_\_\_\_\_