

2026 WDAFL Annual Show

January 9-11, 2026

Horse Information

Name _____ Sex _____ Color _____ Height: _____ Breed _____ Birth Year: _____

Horse USEF # (Required): _____ Horse AQHA (Optional): _____ Horse WDAA (optional) _____

Rider Information

Name _____ USEF # (optional): _____ WDAA # (required) _____

Address _____ City, State, Zip _____

Cell Phone _____ Email _____

Rider Division _____ Open _____ Junior _____ Adult Amateur (must have USEF membership)

Owner Information

Name _____ USEF # (Optional) _____ WDAA # (required) _____

Address _____ City, State, Zip _____

Cell Phone _____ Email _____

Trainer Information

Name _____ USEF # (required) _____ WDAA # (required) _____

Class Information

Number _____ Test _____ Number _____ Test _____ Number _____ Test _____

Number _____ Test _____ Number _____ Test _____ Number _____ Test _____

Number _____ Test _____ Number _____ Test _____ Number _____ Test _____

Stabling/RV

Stall (\$130 each) _____ or Grounds Fee if not stabling (\$50) _____

Early Arrival (\$50/night) _____

Shavings (\$10/bag) _____

RV (\$50/night) _____

Stabling Group _____

Other Fees

Office Fee _____ \$40

USEF fee _____ \$23

AQHA Fee (optional at \$30) _____

WDAA non member fee (\$55) _____

Payment Summary

Class Fees _____

Stabling Fees _____

Other Fees \$40

Total Fees _____

Make Checks payable to WDAFL

Mail entry and payment to: Stacia Wert-Gray

3420 E. 40th Edmond, OK 73013

Please sign the liability releases on the next page
and provide an emergency contact number.



WAIVER AND RELEASE OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

For and in consideration of United States Equestrian Federation, Inc. dba US Equestrian ("USEF") allowing me, the undersigned, to participate in any capacity (including as a rider, driver, handler, vaulter, longeur, lessee, owner, agent, coach, official, trainer or volunteer) in a USEF sanctioned, licensed or approved event or activity, including but not limited to equestrian clinics, practices, shows, competitions and related or incidental activities and _____ ("USEF Event" or "USEF Events"); I, for myself, and on behalf of my spouse, children, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors, and assigns, hereby agree to and make the following contractual representations pursuant to this Agreement (the "Agreement"):

A. RULES AND REGULATIONS: I hereby agree that I have read, understand, and agree to be bound by all applicable Federation Bylaws, rules, and policies including the USEF Safe Sport Policy and Minor Athlete Abuse Prevention Policies (MAAPP) as published at www.usef.org, as amended from time to time.

B. ACKNOWLEDGMENT OF RISK: I knowingly, willingly, and voluntarily acknowledge the inherent risks associated with the sport of equestrian and know that horseback riding and related equestrian activities are inherently dangerous, and that participation in any USEF Event involves risks and dangers including, without limitation, the potential for serious bodily injury (including broken bones, head or neck injuries), sickness and disease (including communicable diseases), trauma, pain & suffering, permanent disability, paralysis and death; loss of or damage to personal property (including my mount & equipment) arising out of the unpredictable behavior of horses; exposure to extreme conditions and circumstances; accidents involving other participants, event staff, volunteers or spectators; contact or collision with other participants and horses, natural or manmade objects; adverse weather conditions; facilities issues and premises conditions; failure of protective equipment (including helmets); inadequate safety measures; participants of varying skill levels; situations beyond the immediate control of the USEF Event organizers and competition management; and other undefined, not readily foreseeable and presently unknown risks and dangers ("Risks").

WARNING:

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

C. ASSUMPTION OF RISK: I understand that the aforementioned Risks may be caused in whole or in part or result directly or indirectly from the negligence of my own actions or inactions, the actions or inactions of others participating in the USEF Events, or the negligent acts or omissions of the Released Parties defined below, and I hereby voluntarily and knowingly assume all such Risks and responsibility for any damages, liabilities, losses, or expenses that I incur as a result of my participation in any USEF Events. I also agree to be responsible for any injury or damage caused by me, my horse, my employees or contractors under my direction and control at any USEF Event.

D. WAIVER AND RELEASE OF LIABILITY, HOLD HARMLESS AND INDEMNITY: In conjunction with my participation in any USEF Event, I hereby release, waive and covenant not to sue, and further agree to indemnify, defend and hold harmless the following parties: USEF, USEF Recognized Affiliate Associations, the United States Olympic & Paralympic Committee (USOPC), USEF clubs, members, Event participants (including athletes/riders, coaches, trainers, judges/officials, and other personnel), the Event owner, licensee, and competition managers; the promoters, sponsors, or advertisers of any USEF Event; any charity or other beneficiary which may benefit from the USEF Event; the owners, managers, or lessors of any facilities or premises where a USEF Event may be held; and all directors, officers, employees, agents, contractors, and volunteers of any of the aforementioned parties (**Individually and Collectively, the "Released Parties" or "Event Organizers"**), with respect to any liability, claim(s), demand(s), cause(s) of action, damage(s), loss, or expense (including court costs and reasonable attorney fees) of any kind or nature ("**Liability**") which may arise out of, result from, or relate in any way to my participation in the USEF Events, including claims for Liability caused in whole or in part by the negligent acts or omissions of the Released Parties.

E. COMPLETE AGREEMENT AND SEVERABILITY CLAUSE: This Agreement represents the complete understanding between the parties regarding these issues and no oral representations, statements or inducements have been made apart from this Agreement. If any provision of this Agreement is held to be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Agreement and shall not affect the validity and enforceability of any remaining provisions.

I HAVE CAREFULLY READ THIS DOCUMENT IN ITS ENTIRETY, UNDERSTAND ALL OF ITS TERMS AND CONDITIONS, AND KNOW IT CONTAINS AN ASSUMPTION OF RISK, RELEASE AND WAIVER FROM LIABILITY, AS WELL AS A HOLD HARMLESS AND INDEMNIFICATION OBLIGATIONS.

By signing below, that I have read, understand, and agree to be bound by all applicable Federation Bylaws, rules, and policies including the USEF Safe Sport Policy and Minor Athlete Abuse Prevention Policies (MAAPP) as published at www.usef.org, as amended from time to time, as well as all terms and provisions of this Prize List. If, despite this Agreement, I, or anyone on my behalf or the minor's behalf, makes a claim for Liability against any of the Released Parties, I will indemnify, defend and hold harmless each of the Released Parties from any such Liabilities as the result of such claim.

The parties agree that this agreement may be electronically signed. The parties agree that the electronic signatures appearing on this agreement are the same as handwritten signatures for the purposes of validity, enforceability, and admissibility.

☐ RIDER/DRIVER/HANDLER/VAULTER/LONGEUR ☐ OWNER ☐ TRAINER ☐ OFFICIAL ☐ STAFF ☐ VOLUNTEER ☐ COACH (IF APPLICABLE)

Signature: _____ Date: _____ Print Name: _____

Parent/Guardian Signature: (Required if Rider/Driver/Handler/Vaulter/Longeur is a minor) _____ Date: _____

Print Parent//Guardian Name: _____ Emergency Contact Phone No. _____



FEDERATION ENTRY AGREEMENT

By entering a Federation-licensed Competition and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Vaulteur or Longeur and on behalf of myself and my principals, representatives, employees and agents, I agree that I am subject to the Bylaws and Rules of the United States Equestrian Federation, Inc. (the "Federation") and the local rules of _____ (Competition). I agree to be bound by the Bylaws and Rules of the Federation and of the competition. I will accept as final the decision of the Hearing Committee on any question arising under the Rules, and agree to release and hold harmless the competition, the Federation, their officials, directors and employees for any action taken under the Rules. I represent that I am eligible to enter and/or participate under the Rules, and every horse I am entering is eligible as entered. I also agree that as a condition of and in consideration of acceptance of entry, the Federation and/or the Competition may use or assign photographs, videos, audios, cable - casts, broadcasts, internet, film, new media or other likenesses of me and my horse taken during the course of the competition for the promotion, coverage or benefit of the competition, sport, or the Federation. Those likenesses shall not be used to advertise a product and they may not be used in such a way as to jeopardize amateur status. I hereby expressly and irrevocably waive and release any rights in connection with such use, including any claim to compensation, invasion of privacy, right of publicity, or to misappropriation. The construction and application of Federation rules are governed by the laws of the State of New York, and any action instituted against the Federation must be filed in New York State. See GR908.4.

If not currently a USEF Active Competing member or Subscriber, I acknowledge that I will be enrolled for no cost as a USEF Fan and my USEF Fan Account will continue to annually automatically renew in USEF's sole discretion. Additionally, I acknowledge that the benefits of a USEF Fan are subject to change without notice. USEF may in its sole discretion, at any time, terminate my USEF Fan status.

BY SIGNING BELOW, I AGREE that I have read, understand, and agree to be bound by all applicable Federation Bylaws, rules, and policies including the USEF Safe Sport Policy and Minor Athlete Abuse Prevention Policies (MAAPP) as published at www.usef.org, as amended from time to time, as well as all terms and provisions of this Prize List. If I am signing and submitting this Agreement electronically, I acknowledge that my electronic signature shall have the same validity, force and effect as if I affixed my signature by my own hand.

RIDER/DRIVER/HANDLER/VAULTER/LONGEUR (mandatory)

Signature: _____

Print Name: _____

TRAINER (mandatory)

Signature: _____

Print Name: _____

OWNER/AGENT (mandatory)

Signature: _____

Print Name: _____

COACH (if applicable)

Signature: _____

Print Name: _____

Parent/Guardian Signature: (Required if Rider/Driver/Handler/Vaulteur/Longeur is a minor) _____

Print Parent//Guardian Name: _____ Emergency Contact Phone No. _____

Is Rider/Driver/Vaulteur a U.S. Citizen: ☐ Yes ☐ No



**FLORIDA AGRICULTURE & HORSE PARK AUTHORITY, INC.
COMPLETE RELEASE FROM LIABILITY IN CASE OF INJURY OR LOSS, WAIVER
INDEMNITY AGREEMENT**

I/we understand that horseback riding and related activities, such as eventing and jumping, are very dangerous, and involve the risk of serious injury and/or death, and/or property damage, including injury and/or death to horses, spectators, and others. Accordingly, I/we agree that any activity engaged in by me on the premises owned by the state of Florida, or related to horses, or horseback riding, if on the premises, is done at my own risk.

Accordingly, I/we release and agree to hold harmless the state of Florida, the Florida Agriculture & Horse Park Authority along with its board of directors and employees, and any and all persons or entities who are guarantors or indemnitors of the above, all agents, employees, promoters, sponsors, other horse riders, horse owners, advertisers, sales persons, photographers, volunteers, (hereinafter called Releasees) from all liability for negligence or otherwise.

I/we assume full responsibility for the risk of bodily injury, illness, communicable or infectious disease/virus, death of myself and/or my horse(s) and any property damage due to negligence of Releasees or otherwise while the premises owned by the state of Florida, the Florida Agriculture & Horse Park Authority along with its board of directors and employees or heavily engaged in horseback riding-related activities, and/or while training, riding, competing, officiating, observing, volunteering, teaching, boarding, working for, or for any purpose relating to horseback riding, eventing, or participating as rider or spectator in such activities.

I/we agree not to sue any Releasees, and I/we release and agree to indemnify for the Releasees form and for all liability for the undersigned, his/her person, representatives, assignees, heirs, and demands therefore on account of injury to her person or property, or communicable disease, or death of undersigned whether caused by negligence of the Releasees or otherwise.

I/we have read and voluntarily signed the release and waiver of liability and indemnity agreement and further agree that no oral representations, statements or inducements apart from the foregoing written agreements have been made nor shall be made except by written and signed addendum

WARNING

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

I HAVE READ THIS ENTIRE RELEASE AND AGREE TO ITS CONTENTS.

Print Name/s: _____

Date: _____

Sign Name: _____
(must be over 21 years of age)

Email: _____

Florida Horse Park
11008 S Hwy 475, Ocala FL 34480
(352) 307-6699



RULES AND REGULATIONS

1. Animals of any kind brought to the facility must observe all regulations of the State of Florida Animal Health Division, and for equines must include a valid proof of a Negative Coggins Test (within prior 12 months).
2. FHP requires all animals to be treated in a humane manner in accordance with state humane society guidelines.
3. Dogs must always be on a leash and under control of the handler.
4. All trash and manure must be disposed of in designated areas only.
5. All motorized vehicles, including but not limited to cars, trucks, golf carts, motorcycles, mopeds, ATVs, etc shall be operated by a licensed driver.
6. Grey water or sewage dumping is not permitted.
7. No smoking in offices, stable pavilions, spectator pavilions, equine buildings, equipment, bleachers or arenas.
8. All obstacles/jumps on the cross-country course are only to be used on scheduled schooling days. (see our website at www.flhorsepark.com for a list of schooling days)
9. Arenas (including grass, fiber and covered) are not to be used unless scheduled in advance and approved.
10. Please report any damage to the facilities by calling (352)307-6699 or email maintenance@flhorsepark.com
11. The Florida Horse Park reserves the right to remove dangerous, disruptive or unlawful persons from the property.
12. Absolutely NO LUNGING IN THE COVERED ARENA, FIBER ARENAS OR GRASS ARENAS. The small sand arenas northeast of the covered arena is designated for lunging.
13. Open campfires are not permitted. Fires should be in contained fire rings.
14. Please have fun and be safe.

Peterson Smith Equine Hospital

4747 SW 60th Ave

Ocala, FL, 34474

(352) 237-6151

AdventHealth Ocala

1500 SW 1st avenue

Ocala, FL, 34471

(352)351-7200

IF AN EMERGENCY, PLEASE CALL 911

Florida Horse Park
11008 S Hwy 475, Ocala FL 34480
(352) 307-6699