

## **FLORIDA STATE FAIR AUTHORITY 2010 BOB THOMAS EQUESTRIAN CENTER HURRICANE POLICY**

The Florida State Fair Authority (FSFA) will accept horses as a service to the equine industry. Once an area has been declared by the National Weather Service to be under a hurricane watch or warning those wishing to evacuate to the Florida State Fairgrounds must call the horse show grounds office at 813-627-4217. Reservations will be taken by phone on a first come first served basis and held with a credit card. Once a phone reservation is made evacuees will be asked to fill out a stall reservation form. This form is available on line at [www.bobthomasequestriancenter.com](http://www.bobthomasequestriancenter.com) under the Hurricane link or one can be faxed or emailed to you. Completed signed forms must be faxed to 813-740-3502 or emailed to [unissa@doacs.state.fl.us](mailto:unissa@doacs.state.fl.us) to complete the reservation. Do not fax this form without calling the office first.

### **COST**

The FSFA will charge its prevailing rate or \$38.00 per stall for the first two days and \$17.00 per day, per stall for each additional day. A day consists of 12:00 A. M. and ends at 11:59 P. M. or any part thereof. If it is determined that the FSFA will accept horses, the first day's stall fee will automatically be charged for the number of stalls reserved. If it is determined that the FSFA will not take horses no charges will be made.

### **CANCELLATIONS**

Cancellation of reservations must be made 24 hours prior to the arrival date stated on the stall reservation form. If the FSFA does accept evacuees and the cancellation of a reservation is not received, the credit card will be charged for the first night's fee and the reservation will be cancelled.

### **PROCEDURE UPON ENTERING THE FAIRGROUNDS**

All evacuees must enter through the Orient Road gate and check in with security at the guard shack. There the responsible party will sign a release form for the horses in their care and custody. In the event the responsible party is not with the horses the release must be faxed or emailed to the horse show grounds office. No one will be allowed on the premises without a signed release. All horses must have a current (within the last 12 months) negative Coggins test.

Stalls assignments will be at the Orient Road gate guard shack. Stalls will be assigned by the Director of Equestrian Events. Stall assignments must be adhered to or the owners or responsible party will be billed double the fees for the stalls and made to move their animals to their assigned location. There will be no tack or feed stalls. Only one animal per stall unless approved by the Equestrian Director.

Shavings can be purchased at the FSFA prevailing rate and charged to the responsible person's credit card on file. Campground fees, if applicable, will be charged to the credit card on file.

Owners or the responsible party are responsible for the care and custody of their own animals. It is also their responsibility to provide hay and feed as the FSFA will not guarantee the availability of these supplies. It is also important that owners prepare for the loss of power and/or water and have reserves available. Owners will also be responsible for any veterinary services that may be required during their stay at the Florida State Fairgrounds.

Riding or Driving of horses will not be allowed. Horses may be hand walked in the covered or Lykes Arena or lunged in the outside rings only.

Manure must be placed in designated areas.

### **AVAILABILITY OF STALLS**

The Florida State Fairgrounds has 471 permanent stalls. They will be assigned on a first come first served basis. We encourage potential evacuees to make reservations early as the facility is generally full within 24 hours of a warning being declared. As stated above unneeded reservations can be cancelled if they are not needed.

**Please Note:** The Florida State Fairgrounds may close during the critical phase of a hurricane at the discretion of the FSFA Executive Director and no staff will be on the grounds at this time. The FSFA also reserves the right to evacuate or vacate the grounds with 12 hours notice. No belligerent or disruptive behavior will be tolerated. Anyone displaying this sort of action will be made to leave the premises.

This form is being completed by:

Printed Name:

Signature:

For the Stall Reservation in the name of:

Printed Name:

**ACKNOWLEDGEMENT OF RISK AND  
RELEASE OF ALL CLAIMS AND INDEMNIFICATION**

The undersigned, \_\_\_\_\_ (jointly and severally, if more than one signatory) hereby requests permission to enter the Florida State Fair Authority grounds located at 4800 U. S. Highway 301 North, Tampa, Florida, 33610. I recognize the inherent dangers that may exist and that accidents of both an unanticipated and unexpected nature may arise and can occur during such time. I expressly assume all risk of injury as a result of the permission being granted, and I EXPRESSLY ASSUME ALL RISK OF INJURY TO MY PERSON AND PROPERTY that may be sustained in connection with or related to the stated and associated activities, in and about the premises.

In consideration for the permission granted to me to enter the premises, and house my horses, I hereby for myself, my heirs, beneficiaries, administrators and assign, remise, release, acquit, satisfy and forever discharge the Florida State Fair Authority, its agents and employees, and the operators and sponsors of the premises, activities of and from all manner and action and actions, cause and causes of action, suits, debts, sums of money, claims and demands, whatsoever, in law or in equity, for injury sustained to my person and / or property during my use of the premises, my presence on the premise, and for my participation in the activities.

In addition, as separate and distinct consideration for the permission granted, I hereby indemnify, will defend and save the Florida State Fair Authority harmless from all claims, demands, causes of action and damages which may occur as a result of the permission herein granted, to the fullest extent permitted by law.

I represent and certify my true age is eighteen (18) years or older, [or if the undersigned is under the age of eighteen (18) years, the undersigned parent or guardian has executed this document intending to be legally bound].

If this document has been executed by more than one person, the acknowledgement of risk, release of claims and indemnification shall be joint and several.

I HAVE READ AND UNDERSTAND THE FORGOING ACKNOWLEDGEMENT AND RELEASE AND HAVE EXECUTED IT OF MY OWN FREE WILL.

IN WITNESS THEREOF, I have executed this acknowledgement and release and delivered same to the Florida State Fair Authority on this \_\_\_\_\_ day of \_\_\_\_\_, 2010.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Minor

\_\_\_\_\_  
Parent/Guardian

Verification Statement

I, \_\_\_\_\_, hereby verify that I have been given a copy of the Florida State Fair Hurricane Policy for the Equestrian Center and that I have read said rules and agree to abide by all rules, regulations, and policies in regards to myself and/or the owner I represent.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

**Florida State Fair Authority  
2010 Bob Thomas Equestrian Center Hurricane Stall Reservation Form**

We require your credit card authorization to be on file to validate your reservation.

Please note your credit card will be charged  
\$38.00 per stall for first two days and \$17.00 per stall, per day, thereafter.

Anticipated Arrival date		Estimated Arrival time	
Projected Departure Date		Projected Departure Time	
Date Cancellation Notice Due		Date Notice Received	
If no cancellation is received as of above date your credit card will be charged.			

I hereby confirm that I have read, acknowledge, and agree to comply with the terms and policies of the FLORIDA STATE FAIR AUTHORITY EQUESTRIAN CENTER'S HURRICANE POLICY and "ACKNOWLEDGEMENT OF RISK AND RELEASE OF ALL CLAIMS AND INDEMNIFICATION FORM".

I understand that my credit card will be charged \$38.00 per stall for the first two days and \$17.00 for each additional day.

I also authorize charging any unpaid balances to my credit card.

Responsible Party  
Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**PLEASE PRINT CLEARLY**

Responsible Party / Card Holder's NAME: \_\_\_\_\_

Responsible Party / Card Holder's BILLING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

STATE: \_\_\_\_\_

ZIP: \_\_\_\_\_

OWNER'S PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

TO BE USED FOR FLORIDA STATE FAIR AUTHORITY SERVICES ONLY		
<b>OFFICE USE ONLY</b>	<b>Date</b>	<b>Time</b>
Policies and this form faxed/emailed:		
Confirmation received and faxed/emailed back		
Request Received @		

AMERICAN EXPRESS

DISCOVER

MASTER CARD

VISA

<b>ACCOUNT NO.</b>																				
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<b>EXPIRATION DATE</b>				
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