## Stall Liability Form for the Wood County Fair

I,, do understand the risk and responsibility associated with stalling a
horse(s) in the stalls on the Wood County Fair Grounds. By signing this agreement, I am claiming all
responsibility to insure the following conditions:
<ol> <li>Only Shavings will be used in the stall(s) at any time;</li> <li>There will be no tying to a temporary front or side. If necessary, horses may be tied to a corner;</li> <li>Stall(s) will be cleaned and free of manure and shavings at the end of my stay;</li> <li>Any manure on the stall walls will be washed off at the end of my stay;</li> <li>Horse will always have a halter on even when loose in the stall.</li> <li>Any other rules set forth and posted by the Wood County Agricultural Society and the Wood County Horse and Pony Advisors.</li> </ol>
I understand that failure to meet all of these conditions I may be asked to leave the fair and may not be allowed to stall at the fair in the future.
I agree to pay \$50.00 per stall for the use of said stall(s) for the week of the fair or \$20 per night.
I also understand that if there is damage to any stall wall it may cost up to \$1000.00 to fix/replace per panel and I assume all responsibility to pay for said fix/replacement.
The Wood County Agricultural Society, its employees, officers, directors, and agents will not be held liable nor responsible for any damage to participant by fire, water, disease, windstorm, any act of god, or any other cause, whatever its nature. Nor will the Society be held liable for any loss by thefts or accidents to person or property, nor for any errors or omissions in the official rules and regulations.
I/we have read and understand this and agree to abide by this waiver of responsibility and Constitutions and By-Laws of the Wood County Agricultural Society.
# of stalls: Name of Responsible Party:
Price per stall: (Printed)
Stall #: Signature of Responsible Party:

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

Telephone #: \_\_\_\_\_

Address: