

Make checks payable to: Littlewood Farm  
 Mail to: Littlewood Farm  
 3512 Grand Farms Drive  
 Wellington, FL 33414  
 561-798-2977 Fax 561-798-3922  
 www.littlewood.com



# LITTLEWOOD

## Vendor Space Rental 2008

### APPLICATION



ONLY ONE PER FORM.  
 DESCRIPTION OF UNIT:  
 TAG # OF UNIT:

ARRIVAL DATE \_\_\_\_\_  
 DEPARTURE DATE \_\_\_\_\_

**UNDER FLORIDA LAW, AN EQUINE ACTIVITY SPONSOR OR EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO, OR DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF THIS ACTIVITY. SIGNATURE BELOW INDICATE EACH OF US HAS READ & UNDERSTANDS THIS STATEMENT.**

OFFICE USE	Type of Vendor	Owner Name	Size	Occupant(s) Name(s)
------------	----------------	------------	------	---------------------

**Vendor hereby agrees that no Food or Beverages will be sold or in any way distributed from the vendor stand (area) except any item listed here. Furthermore all sales are of equestrian related products or services as discussed. It is understood that vendor is responsible for his own sales, safety, security and Littlewood has no responsibility:**

THIS IS AN AGREEMENT AND AFFIRMATION THAT ALL PARTICIPANTS (WHICH INCLUDE, WITHOUT LIMITATION, THE OWNER, LEASEE, TRAINER, MANAGER, AGENT, COACH, DRIVER, RIDER, HANDLER AND THE HORSE) THEMSELVES, THEIR PRINCIPALS, REPRESENTATIVES, EMPLOYEES, AND AGENTS: SHALL BE SUBJECT TO THE CONSTITUTION AND RULES OF THE ASSOCIATION AND THE LOCAL RULES OF LITTLEWOOD FARM, BURTON & SONS, LITTLEWOOD FENCES, INC. STALL WATCH, PALM BEACH HOLDINGS, INC., AND WELLINGTON EQUESTRIAN PARTNERS, LLC., AND ALSO AGREE TO BE BOUND BY THE CONSTITUTION AND RULES OF THE USEF AND WILL ACCEPT AS FINAL THE DECISION OF THE HEARING COMMITTEE ON ANY QUESTION ARISING UNDER SAID RULES AND AGREE TO HOLD LITTLEWOOD FARM, BURTON & SONS, LITTLEWOOD FENCES, INC. STALL WATCH, PALM BEACH HOLDINGS, INC., AND WELLINGTON EQUESTRIAN PARTNERS, LLC., THEIR OFFICIALS, DIRECTORS AND EMPLOYEES HARMLESS FOR ANY ACTION TAKEN; (4) AGREE THAT AS A CONDITION OF THIS USE AGREEMENT, THEY AUTHORIZE THE USEF AND/OR THE LITTLEWOOD MANAGEMENT TO MARKET, TRANSFER, ASSIGN OR OTHERWISE MAKE USE OF ANY PHOTOGRAPHS, LIKENESSES, FILMS, BROADCASTS, CABLECASTS, AUDIOTAPES TAKEN OF THE HORSE(S) AND PARTICIPANT(S) WHILE ON THE GROUNDS, INCIDENT TO OR IN TRANSIT BETWEEN THE STABLING FACILITY AND THE EVENT SITE, IN ANY WAY THEY SEE FIT FOR THE PROMOTION, COVERAGE OR BENEFIT OF LITTLEWOOD, OR THE USEF, WITHOUT COMPENSATION TO ANY OF THEM, SO LONG AS THE USE NEITHER JEOPARDIZES AMATEUR STATUS NOR ENDORSES A SPECIFIC PRODUCT OR SERVICE, AND HEREBY EXPRESSIVELY AND IRREVOCABLY WAIVE AND RELEASE ANY RIGHTS IN CONNECTION WITH SUCH USE, INCLUDING ANY CLAIM TO INVASION OF PRIVACY, RIGHT OF PUBLICITY, OR TO MISAPPROPRIATION; AND AGREE THAT THEY USE THE INDICATED AREAS VOLUNTARILY IN LITTLEWOOD FARMFULLY AWARE THAT HORSE SPORTS AND THE USE OF THESE AREAS INVOLVE INHERENT DANGEROUS RISK OF SERIOUS INJURY OR DEATH, AND BY USING THEM THEY EXPRESSLY ASSUME ANY AND ALL RISK OF DEATH, AND BY THIS USE THEY EXPRESSLY ASSUME ANY AND ALL RISK OF INJURY OR LOSS, AND THEY AGREE TO INDEMNIFY AND HOLD THE USEF, LITTLEWOOD FARM AND THEIR OFFICIALS, DIRECTORS, EMPLOYEES AND AGENTS HARMLESS FROM AND AGAINST ALL CLAIMS INCLUDING FOR ANY INJURY OR LOSS SUFFERED DURING OR IN CONNECTION WITH THE USE, WHETHER OR NOT SUCH CLAIM, INJURY OR LOSS RESULTED, DIRECTLY OR INDIRECTLY, FROM THE NEGLIGENT ACTS OR OMISSIONS OF SAID OFFICIALS, DIRECTORS, EMPLOYEES OR AGENTS OF THE USEF OR COMPETITION. THE CONSTRUCTION AND APPLICATION OF USEF RULES ARE COVERED BY THE STATE OF NEW YORK, AND ANY ACTION AGAINST THE USEF MUST BE FILED IN NEW YORK STATE. SEE ARTICLE 1502.5. I FURTHER AGREE TO HOLD HARMLESS THE FACILITY, THE INSURANCE CARRIER, LITTLEWOOD FARM, BURTON & SONS, LITTLEWOOD FENCES, INC. STALL WATCH, PALM BEACH HOLDINGS, INC., AND WELLINGTON EQUESTRIAN PARTNERS, LLC., FROM AND AGAINST ALL CLAIMS INCLUDING FOR ANY INJURY OR LOSS SUFFERED DURING OR IN CONNECTION WITH THIS USE, WHETHER OR NOT SUCH A CLAIM, INJURY OR LOSS RESULTED, DIRECTLY OR INDIRECTLY, FROM THE NEGLIGENT ACTS OR OMISSIONS OF THE ABOVE ENTITIES. WE FURTHER AGREE TO FOLLOW ALL THE RULES AS LISTED ON THE REVERSE SIDE OF THIS AGREEMENT AND ANY AMENDMENTS THERETO, AND THAT THIS USE AGREEMENT MAY NOT BE ASSIGNED, SUBLEASED, TRANSFERRED OR CONVEYED TO OTHERS WITHOUT WRITTEN AUTHORIZATION FROM LITTLEWOOD FARM.

# \_\_\_\_\_ SPACE @ \$ \_\_\_\_\_ per week + tax \_\_\_\_\_

Indicate arrival date \_\_\_\_\_

Indicate departure date \_\_\_\_\_

**NOT VALID UNTIL ACCEPTED BY LITTLEWOOD & ACKNOWLEDGED BELOW:**

Accepted by: \_\_\_\_\_ Faxed to: \_\_\_\_\_  
 Dated \_\_\_\_\_ Mailed to Vendor at address on form \_\_\_\_\_

Please bill my Visa \_\_\_\_\_ Mastercard \_\_\_\_\_

Account # \_\_\_\_\_

Expiration date \_\_\_\_\_ Zip Code \_\_\_\_\_ CVS 3 Digit Code \_\_\_\_\_

Cardholder name \_\_\_\_\_

Signature \_\_\_\_\_

Agreement not signed will not be accepted • Signatures required in three (3) places (at X) below • Signatures indicate that each of us has read and understands the above. Vendor understands that Littlewood does not supply electricity or assure the voltage needed. Vendor may request and pay for an electric contractor to upgrade whatever service is needed provided no interruption of Littlewood's service is assured and providing that the installation in no way interferes with the show.

X \_\_\_\_\_  
**VENDOR'S SIGNATURE**  
 Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_  
 State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone (\_\_\_\_)- \_\_\_\_\_

X \_\_\_\_\_  
**OWNER'S SIGNATURE**  
 Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_  
 State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone (\_\_\_\_)- \_\_\_\_\_  
 SS# \_\_\_\_\_

X \_\_\_\_\_  
**SIGNATURE**  
 I hereby, agree to follow all rules as printed on the back of this agreement and any published updates to the rules. I understand that failure to follow the rules will cause me to loose my space immediately and I WILL BE ENTITLED TO NO REFUND. No further notice is required and I will behave in the proper manner and keep my space clean, quiet and safe at all times.  
 Local contact # \_\_\_\_\_  
 Insurance \_\_\_\_\_ Occupational Lic \_\_\_\_\_