

Rider Horsemanship, Inc.

**SAFETY HELMET/PROTECTIVE HEADGEAR STATEMENT**  
Florida

PRINT NAME OF CUSTOMER/GUEST: \_\_\_\_\_

ADDRESS OF CUSTOMER/GUEST: \_\_\_\_\_

I, for myself and/or on behalf of my child or legal ward, have been fully warned and advised by Rider Horsemanship, Inc. (hereafter, "Instructor") that I should purchase and wear properly fitted and secured ASTM-standard/SEI-certified protective headgear (helmet and strap) that is designed for use by equestrians when riding or near horses or ponies in order to reduce the severity of some head injuries and possibly prevent death from happening as the result of a fall or other occurrences. I am not relying on Instructor or anyone affiliated with Instructor to provide a certified equestrian helmet or headgear for me, to check any helmet or strap that I may wear, or to monitor my compliance with this suggestion at any time – *now or in the future*. **If I choose to wear an ASTM-standard/SEI-certified helmet and headgear, or if I choose not to, this is my decision alone.**

I am NOT relying on Instructor to provide a certified helmet for me and/or my child/ren, to check any helmet or strap that I/we may wear, to monitor whether I/my child complies with Florida's helmet law, and/or to monitor my/our compliance with Instructor's suggestion to wear a helmet at any time – now or in the future. **If I choose to wear a helmet, if I choose to provide a helmet for my minor child(ren), or how my child or I wear a helmet or headgear are my/our decisions alone, not decisions or responsibilities of the Instructor.**

I also understand that Florida law (Florida Statutes Annotated §773.06) includes a helmet requirement that applies to children ages 16 and under who ride equines at certain locations and under certain circumstances.

**I HAVE READ THIS STATEMENT CAREFULLY BEFORE SIGNING.**

SIGNATURES:

CUSTOMER/GUEST: \_\_\_\_\_ DATE: \_\_\_\_\_

PARENT/GUARDIAN: \_\_\_\_\_ DATE: \_\_\_\_\_