

Declaration of Refusal of Safety Equipment

I, the undersigned, recognize the dangers inherent with horseback riding and related activities. I realize that I am subject to injury from these activities and that no form of planning can remove all of the danger to which I am exposing myself. I have made the decision NOT to use a protective helmet, which could prevent permanent brain damage in the event of an accident. Texas A&M University – Commerce strongly recommends the use of an equestrian safety helmet, which I am hereby refusing to wear as a safety precaution.

On the line below, please write in your own handwriting the following sentence:

“I have read and understand the above waiver”

Handwritten Statement

Printed Name

Signature

Date