

PARTICIPANT NAME: \_\_\_\_\_

## Davis Rodeo Club Riding Helmet Waiver

I, the undersigned, recognize the dangers inherent with horseback riding. I am assuming the hazard of this risk upon myself since I wish to ride horses. I realize I am subject to injury from this activity and that no form of preplanning can remove all of the danger that I am exposing myself to. It has been recommended to me to wear a protective riding helmet, which could have prevented permanent brain damage in the event of an accident. Against the advice of the Davis Rodeo Club, the UCD Horse Barn, and all associated persons, I am refusing this critical safety precaution.

*In your own handwriting, write the following line below:*

**I HAVE READ AND UNDERSTAND THE ABOVE WAIVER.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian of Minor

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date