



Stone Ledge Farm, Inc.

6912 Manchester Rd. ~ South Beloit, IL ~ 61080 ~ 815-509-1695 ~608-312-9215

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Helmet Release Waiver

It is statistically clear that there are certain inherent dangers associated with horseback riding. One of those dangers is the risk of suffering serious head injury should the rider fall or be thrown from his/her horse. It is, therefore, the policy of Stone Ledge Farm, Inc. and its assigns, that safety riding helmets will be worn at all times when riders are mounted on a horse.

I, _____, being fully aware of that policy and the reason for it, choose of my own free will, NOT to wear a safety riding helmet. In taking this action, I hold Stone Ledge Farm, Inc., its assigns, and their insurer free of any and all liabilities for injuries that I may receive as a result of my actions and failure to wear a safety riding helmet.

RIDER _____

SIGNATURE OF PARENT OR GURADIAN**** (Waivers cannot be granted to persons under the age of 18 without the consent of a parent or legal guardian)

Date _____

Witness (Instructor) _____