## **ONE K HELMET REPLACEMENT POLICY**

## IMPORTANT NOTICE: HELMETS INVOLVED IN ACCIDENTS SHOULD BE REPLACED AND NOT WORN AGAIN!

If your ONE K helmet is ever in an accident within the replacement period, return it to us for replacement at the costs listed below. PLEASE DO NOT RIDE IN THE HELMET AGAIN IF IT WAS INVOLVED IN AN ACCIDENT! RETURN IT FOR A REPLACEMENT.

The following replacement policy is in effect for ONE K Helmets <u>purchased in the United States (international customers must contact the store where the helmet was purchased)</u>. English Riding Supply will replace your helmet involved in an accident for up to 3 years after purchase for a cost listed below:

HELMET	ITEM#	PRICE	PRICE W/ SHIPPING & HANDLING	
AVANCE CCS WITH MIPS	471208	\$184.98	Plus \$5.00 S&H = \$189.98	
JUNIOR CCS WITH MIPS	471143	\$122.50	Plus \$5.00 S&H = \$127.50	
CCS WITH MIPS	471045	\$167.50	Plus \$5.00 S&H = \$172.50	
DEFENDER CELESTIAL	470923	\$219.98	Plus \$5.00 S&H = \$224.98	
DEFENDER GLAMOUR ROSE GOLD	470922	\$249.98	Plus \$5.00 S&H = \$254.98	
AVANCE CHROME STRIPE	470708	\$149.98	Plus \$5.00 S&H = \$154.98	
DEFENDER BLING	470678	\$224.98	Plus \$5.00 S&H = \$229.98	
AVANCE ROSE GOLD STRIPE	470668	\$164.98	Plus \$5.00 S&H = \$169.98	
DEFENDER ROSE GOLD STRIPE	470663	\$149.98	Plus \$5.00 S&H = \$154.98	
AVANCE	470661	\$149.98	Plus \$5.00 S&H = \$154.98	
DEFENDER AIR	470562	\$164.98	Plus \$5.00 S&H = \$169.98	
DEFENDER JUNIOR SUEDE	470433	\$139.98	Plus \$5.00 S&H = \$144.98	
DEFENDER JUNIOR	470432	\$112.48	Plus \$5.00 S&H = \$117.48	
DEFENDER CHROME STRIPE	470152	\$139.98	Plus \$5.00 S&H = \$144.98	
RACER SKULL CAP	469693	\$139.98	Plus \$5.00 S&H = \$144.98	
DEFENDER AIR SUEDE	468736	\$179.98	Plus \$5.00 S&H = \$184.98	
DEFENDER BLING SUEDE	468526	\$249.98	Plus \$5.00 S&H = \$254.98	
DEFENDER SUEDE	468260	\$159.98	Plus \$5.00 S&H = \$164.98	
DEFENDER	468259	\$139.98	Plus \$5.00 S&H = \$144.98	
DEFENDER GLIDSTER (DISCONTINUED)	470924	Please choose another model to replace this helmet		
DEFENDER GLAMOUR CHROME STRIPE (DISC)	470921	Please choose another model to replace this helmet		
DEFENDER GLAMOUR (DISCONTINUED)	470819	Please choose another model to replace this helmet		
DEFENDER COLOR TRIM (DISCONTINUED)	470518	Please choose another model to replace this helmet		

To receive a replacement helmet, please follow the instructions listed below:

- 1. Fill out the Return Authorization Form and return with your helmet. If you cannot print the accident form, please call 1-866-569-1600 and we will send one to you, or contact your retailer for a form.
- 2. Return the damaged helmet freight pre-paid
- 3. Return a copy of your dated sales receipt
- 4. Include a signed and dated letter describing the accident in as much detail as possible
- 5. Provide us with your contact name, address, email address & phone number.

## SOMEONE MUST BE AVAILABLE AT THAT ADDRESS TO SIGN FOR YOUR HELMET.

6. A check or money order made out to English Riding Supply, or credit card information for payment as indicated above. Send to address below:

ENGLISH RIDING SUPPLY

C/O ACCIDENT REPLACEMENT 520 KANE STREET SCRANTON, PA 18505



520 Kane Street • Scranton, Pa 18505 • 570 961 9700 • (F) 570 961 9701

## One K™ DAMAGED HELMET RETURN AUTHORIZATION FORM

SELECT METHOD OF PAYMENT: [ ] CHECK [ ] MONEY ORDER [ ] CREDIT CARD  NAME AS IT APPEARS ON CREDIT CARD:	FIRST NAME:	LAST NAME:	
CITY:	STREET ADDRESS:		
PHONE:	(HELMETS ARE SENT SIGNATURE-F	REQUIRED)	
HELMET MODEL/ITEM NUMBER:	CITY:	STATE: ZIP:	
HELMET COLOR: DATE PURCHASED: STORE WHERE IT WAS PURCHASED: BRIEF ACCOUNT OF ACCIDENT:  SELECT METHOD OF PAYMENT: [ ] CHECK [ ] MONEY ORDER [ ] CREDIT CARD  NAME AS IT APPEARS ON CREDIT CARD: BILLING ADDRESS OF CREDIT CARD: CITY, STATE, ZIP: CARD TYPE: [ ] VISA [ ] MASTER CARD [ ] AMERICAN EXPRESS  CARD NUMBER: CARD EXPIRATION DATE: SECURITY CODE: By signing this form, I hereby authorize English Riding Supply (ERS) to use the above credit card to process my order.  SIGNATURE: DATE: *Please note that the damaged helmet MUST be sent back to ERS to receive the discounted replacement. FOR OFFICE USE ONLY:	PHONE:I	EMAIL ADDRESS:	
BRIEF ACCOUNT OF ACCIDENT:  BRIEF ACCOUNT OF ACCIDENT:  SELECT METHOD OF PAYMENT: [] CHECK [] MONEY ORDER [] CREDIT CARD  NAME AS IT APPEARS ON CREDIT CARD:  BILLING ADDRESS OF CREDIT CARD:  CITY, STATE, ZIP:  CARD TYPE: [] VISA [] MASTER CARD [] AMERICAN EXPRESS  CARD NUMBER:  CARD EXPIRATION DATE:  SECURITY CODE:  By signing this form, I hereby authorize English Riding Supply (ERS) to use the above credit card to process my order.  SIGNATURE:  *Please note that the damaged helmet MUST be sent back to ERS to receive the discounted replacement.  FOR OFFICE USE ONLY:	HELMET MODEL/ITEM NUMBER: _	HELMET SIZE: _	
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	discounted replacement.		
DATE OF RETURN: ORDER #	FOR OFFICE USE ONLY:		
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