



Brain Injury Association of Florida Inc.  
201 East Sample Road  
Pompano Beach, FL 33064  
Phone: 954-786-2425  
Fax: 954-786-2437  
Helpline: 800-992-3442

*A Chartered State Affiliate of the Brain Injury Association, Inc., Washington, DC*

## REQUEST FOR HELMUTT<sup>®</sup> COSTUME / MASCOT APPEARANCE

**Please fill out the information below, sign and submit form at least 20 days prior to requested appearance date.**

Requested Appearance Date(s): \_\_\_\_\_

Responsible Person's Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Organization Requesting: \_\_\_\_\_

Organization Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Ship-To Address (if different from above): \_\_\_\_\_

Ship to Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

**Reason for Request (include purpose, location and estimated number of people and their ages that will see the mascot).**

Name of Event: \_\_\_\_\_

Location of Event: \_\_\_\_\_

# People Attending: Children: \_\_\_\_\_ Adults: \_\_\_\_\_ Seniors: \_\_\_\_\_ or All Ages: \_\_\_\_\_

Event Purpose, promotion, special guest etc. \_\_\_\_\_

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

**Helmutt<sup>®</sup>**  
**Costume Request Form**  
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**Acceptance: I agree to be the responsible party and abide by the following rules when using the Helmutt<sup>®</sup> costume:**

1. Upon receipt of the costume I will **review the inventory** list and immediately report any missing or damaged items to Brain Injury Association of Florida, Inc. (BIAF). I will be responsible for any damaged or missing items that are not reported PRIOR to my requested appearance date. I will be responsible for any damage or lost items that occur during my possession of the costume.
2. The performer within the costume will be **accompanied at all times** by a non-costumed individual. This individual (called a Shadow) will assist the performer in putting on and taking off the costume, directing the performer who will have limited vision and mobility, and protecting the performer from potentially dangerous situations. The Shadow will be the speaking member of the party. **HELMUTT<sup>®</sup> DOES NOT SPEAK - HE IS A DOG.**
3. The performer must not spend more than 15 minutes with the head on the costume - **FIFTEEN MINUTES MAXIMUM WITH THE HEAD ON FOLLOWED BY TEN TO FIFTEEN MINUTES OF REST.** Every effort should be made to keep the performer comfortable and to prevent him/her from becoming overheated. Unless it becomes impossible and for the safety of the performer, the head should be removed in a private place away from the sight of the audience. BIAF recommends that the performer completely remove the costume for a thirty minute rest after three fifteen minute appearances. The performer should drink plenty of water during all breaks.
4. The complete costume will be shipped, clean and dry, within 48 hours of completion of performance, to the following address:  

Gilmore Associates, Inc.  
ATTN: BIAF Helmutt Costume  
6851 SW 21<sup>st</sup> Court, Bay 6  
Davie, FL 33317
5. I agree to return Helmutt<sup>®</sup> **postage paid by me or my company via UPS ground, clean and dry, in good condition,** in accordance with the care instructions on the "***Helmutt<sup>®</sup> Costume Maintenance and Care***" form, and ready for re-use.

**Signature:**

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**Printed Name and Title:**

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**Date:**

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