

REGISTRATION FORM

Status: Bouldering Only and U18 Bouldering Only



To Be Completed By Reception Staff TEST CARD COMPLETED	CARD	PASS	FAIL
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TEST CARD COMPLETED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Name:	<input type="text"/>	Surname	<input type="text"/>
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DOB:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Title	<input type="text"/>	Adult/Child U18	<input type="text"/>	Male/Female	<input type="text"/>	(please delete)
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Mobile or best contact number:	<input type="text"/>
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Email:	<input type="text"/>
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Alternative or Best Number:	<input type="text"/>
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Address:	<input type="text"/>
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Postcode	<input type="text"/>
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Optional for over 18s, at least one Emergency Contact must be given for children	
Emergency Contact 1	Emergency Contact 2
Contact name:	Contact name:
Relationship:	Relationship:
Best contact:	Best contact:

Have you read and understood [and explained to your child] our Terms and Conditions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Do you [or your child] have any questions regarding our Terms and Conditions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Do you agree to abide [and ensure your child abides] by our Terms and Conditions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Do you understand that failure to exercise due care could result in [your child's] injury or death?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Do you [or are you satisfied your child] understand[s] that jumping or falling from the bouldering wall increases the risk of injury?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Do you [or are you satisfied your child] understand[s] that you may only climb using the bouldering facilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Do you [or are you satisfied your child] understand[s] that only bouldering is permitted; and that you [they] may only climb with competent supervision in the roped areas?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Are you [is your child] competent to use our bouldering facilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Declaration of fitness:	I certify that to the best of my knowledge I [my child] there is no medical reason, condition or ailment from which I [my child] suffer that will put me [my child] or others at risk.
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Climbing and exercise is undertaken at my [and my child's] risk. I agree to stop [my child] exercising if pain, dizziness or any other physical discomfort is felt and inform a member of staff immediately.

Signature of Adult [or Child's NOK] :	Date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Signature of Adult [or Child's NOK] :	<input type="text"/>
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THIS PART TO BE FILLED IN BY RECEPTION STAFF

Date	<input type="text"/>		
Details	<input type="text"/>	Reg. No	<input type="text"/>
Signature	<input type="text"/>		

STATEMENT FROM ROCK CLIMBING UK GOVERNING BODY, 'THE BRITISH MOUNTAINEERING COUNCIL'
"The British Mountaineering Council recognises that climbing and mountaineering are activities with a danger of personal injury or death. Participants in these activities should be aware of and accept these risks and be responsible for their own actions and involvement".



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Under 18 must have the following completed by their parent or guardian

Have you read and understood Boulders terms and conditions for Unsupervised bouldering for children between the age of 14 and 18? (U18 Bouldering Only)

Y	E	S
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Do you understand that your child will be climbing unsupervised and is responsible for their own safety?

Y	E	S
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Do you understand that your child may be bouldering with other under 18s and that, in some circumstances, that minor will be responsible for your child's safety?

Y	E	S
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Does your child understand the increased risks associated to climbing without supervision?

Y	E	S
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Signature of Adult [or Child's NOK]: _____

Date	D	D	M	M	Y	Y
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