



14-17 Year Old Registration Form UNSUPERVISED CLIMBING

Please complete the form in BLOCK CAPITALS

Personal Details

Name	Date of Birth	Age
Address	Postcode	
Telephone No.	Email	

Assessment Checklist

	Yes/No	Staff Initial
I can put a harness on correctly		
I can tie on, using a figure 8 and stopper knot		
I can belay effectively for a top rope climber		
I can belay effectively for a lead climber		
I can lead climb safely		
*Have you read and understood the Conditions of Use and Rules of the Centre?		
*Do you understand that failure to exercise due care could result in injury or death?		
Do you agree to abide by the Rules of the climbing centre?		
* Do you have any questions regarding the application of the Conditions of Use or Rules?		

*These assessments are minimum requirements for bouldering

Parent/Guardian Details

Name	Date of Birth
Address	Postcode
Relationship	Telephone No.

Parent/Guardian Consent

- I have read and understood the conditions of use and rules of the centre
- I recognise that climbing is a potentially dangerous activity
- I hereby give my consent for the above named to climb on roped and bouldering climbing walls
- I understand that children will belay other children

By ticking this box I confirm that I am either the child's legal guardian or that I have permission from the child's legal guardian to bring them climbing.

Participation Statement "The British Mountaineering Council (BMC) 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."

Signature

Date

For use by Staff Only

Name

Date