



Registration form (under 18 unsupervised) Registration Number _____

Participation Statement: Climbing and bouldering are activities with a danger of personal injury. Although the Wall is an artificial environment, many of the risks involved are no less serious than when climbing outside on a crag or boulder. Parents of participants in these activities should be aware of and accept these risks before allowing their children to take part. Participants who climb beyond their capabilities on any indoor wall are likely to fall. Any fall may result in an injury despite the safety systems in place to avoid it. You must make your own assessment of the risks before you provide consent for your child to climb. **Legal Jibber Jabber:** The Legal Jibber Jabber is important, is intended to be legally binding and sets out the terms and conditions that govern our agreement with you.

Personal Details: By providing the details below you consent to the Wall using them to keep in touch with you regarding your child's use and membership of the Wall.

Child's name _____

Address _____

Date of birth _____ Age _____

Parent's Name: _____

Parent's tel no: _____ Email _____

Conditions of Registration: Once you have read the Wall's Rules, you must answer the following questions and sign the declaration at the bottom of the form. A in the box provided means "yes". A blank box or an "x" in the box indicates that you do not agree with, or are unable to answer the questions below. Your child will only be allowed to climb at the Wall once you have given satisfactory answers to the questions below.

Are you legally responsible for the child named above?

Do you understand that the matting under the climbing surfaces does not guarantee your child's safety?

Have you read and understood the Legal Jibber Jabber and the Wall's rules?

Do you understand that climbing is a hazardous activity and failure by your child to exercise care could result in their injury?

Do you provide consent for your child to climb at The Wall without adult supervision?

Declarations: I confirm and warrant that to the best of my knowledge and belief that the child named above does not suffer from a medical condition or injury, which might have the effect of making it more likely that they will be involved in an accident which could result in injury to themselves or others; that I have watched the Wall's induction video; and the above information is correct and if any information changes I will notify the Wall.

Signature _____ Date _____

THIS PART TO BE FILLED IN BY RECEPTION STAFF

Did the climber watch the Wall's induction video? yes/ no

Did you complete an induction with the climber? yes/ no

Staff name: _____ Date: _____