



JUNIOR REGISTRATION FORM

Climbing at Shropshire Climbing Centre



Participation Statement

“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.”

Personal Details Please complete the form in BLOCK CAPITALS.

	Child First Name	Parent/guardian name	
		Child Surname	
Male / Female		Address	
Date of Birth			
Tel. No.			
Mobile			Post Code:
		E-mail address	

Conditions of Registration

Once you have read the **Conditions of Use and Rules** of the climbing centre, you must answer the following questions by writing either “YES” or “NO” in the box provided then sign the declaration at the bottom of the form. If your child has been signed off as able to use the centre unsupervised then you should be aware that this does not exclude them from the usual dangers posed within the centre

- 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 your injury or death?
- Do you have any questions regarding the application of the Conditions of Use or the Rules?
- Do you agree to abide by the Rules of the climbing centre?
- Do you appreciate the hazards to be aware of when bouldering?.....

Declaration of fitness

I certify that to the best of my knowledge, my child does not suffer from a medical condition which might have the effect of making it more likely that he/she be involved in an accident which could result in injury to his/herself or others.

Declaration of fact

I also confirm that the above information is correct and if any information changes I will notify the centre.

Permission

I give permission and consent for the above named child to use Shropshire Climbing Centre whilst under the supervision of a Shropshire Climbing Centre instructor or under the supervision of the following registered climber(s)

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Signature	Date
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THIS PART TO BE FILLED IN BY RECEPTION STAFF			
Registration Number		Registration type	JUNIOR
Amount Paid for Registration	£	Have you asked a sample question?	
Signature		Date	
Signed off for unsupervised climbing (14 and over only)			
Bouldering only		Bouldering and ropes	
Signature		Date	