



Registration Form

Unsupervised Climbing

“All climbing and bouldering activities have a risk of serious injury or death. Participants must be aware of and accept that even if they follow all good practice there may still be the risk of accident and injury. It is the responsibility of the participant to adhere to the conditions of use.”

It is important that you understand this document. There is inherent risk involved with climbing centres and associated activities. By signing this form, you are stating you understand that these risks cannot be completely removed. If you do not understand any of the terminology or content, ask a member of staff to clarify.

PLEASE USE BLOCK CAPITALS:

Full Name:		Gender:	
Mobile No.:		DOB:	
Medical Info:			
Emergency Contact Name		Emergency Contact No.:	

	Yes/No
1. Are you over 18 years of age? If answering 'NO', a parent or guardian must sign on your behalf.	
2. Have you read and understood the Conditions of Use and Rules of The Barn Climbing Centre? If you have any questions, please inform a member of staff.	
3. Are you registering for BOULDERING and AUTO BELAY only ? If answering YES skip to question 7	
← 4. If you intend to lead or top rope , can you fit a climbing harness correctly, attach a rope to your harness using a suitable climbing knot and use a belay device to secure a falling climber and lower a climber from the wall?	
5. Are you competent in the skills and knowledge of lead climbing? If answering NO, you will NOT take part in any lead climbing.	
6. Do you require instruction in any of the above techniques required for Top Rope or Lead climbing?	
7. Do you understand that failure to exercise due care could result in injury or death?	
8. Do you agree to abide by the Rules of The Barn Climbing Centre?	
9. Have you received a full centre briefing from a member of staff and asked any questions that may have arisen?	

Declaration of Fitness: I certify that to the best of my knowledge; I do not suffer from a medical condition which might have the effect of making it more likely that I be involved in an accident which could result in injury to myself or others.

Declaration of fact: I also confirm that the above information is correct and if any information changes I will notify the centre. If I am using my own equipment, I certify that it is fit for purpose and that I know how to use it

Signature: **Print:**

Parent/Guardian Signature: **Print:**

Date:

Staff use only

Registration No.: Registration Type: **Boulder + Auto Belay** **B + Top Rope** **B, TR + Lead**

Signature: Date: Have you asked a sample question?