

ADULT CLIMBING REGISTRATION FORM

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.

Title: First Name:

Surname:

Gender: Male / Female / Prefer not to say University ID (card number):

Date of Birth: / /

Address:

Post Code:

Tel. No:

Email :

Details of Medical condition/Disabilities and current medication:

Emergency contact name:

Emergency Contact Phone Number:

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. Only climbers who satisfactorily answer the questions and demonstrate competence will be registered and allowed to climb unsupervised.

Any Climbers who require supervision must be supervised by a registered competent climber.

Are you over 18 years of age?	
Have you read and understood the Conditions of Use and Rules of the centre?	
Do you have any questions regarding the application of the Conditions of Use or the Rules?	
Do you agree to abide by the Conditions of Use and Rules of the Climbing Centre?	
Have you read and understood the BMC participation statement (see top of page) with regard to the risk involved in the sport of climbing?	
Do you understand that failure to exercise due care could result in your injury or death?	
Can you put on a climbing harness correctly?	
Can you attach a rope to your harness using a figure of 8 climbing knot?	

Can you use a belay device to secure a falling climber and safely lower a climber from the wall?	
Do you require instruction in any of the above techniques?	
Have you previously undertaken a Warwick Sport competency check?	
Have you watched the Warwick Sport Bouldering induction and do you fully understand and accept the risks involved in this element of the sport?	
Have you been through a Warwick Sport Auto Belay/Speed Belay induction and do you understand and accept the risks involved?	

<u>Declaration of fitness</u>	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.
<u>Declaration of fact</u>	I also confirm that the information I have filled out is correct and if any information changes I will notify the centre.

Signature Date

For our privacy policy please visit our website: <https://warwick.ac.uk/services/sport/terms>

FOR STAFF USE ONLY

Instructor Signature	<input type="text"/>		
Instructor Print	<input type="text"/>		
Registration Number (Gladstone ID)	<input type="text"/>	Registration Type	<input type="text" value="TR AB SB B"/>
Signature	<input type="text"/>	Print	<input type="text"/>
Date	<input type="text"/>		

If supervision is required the designated registered competent climber must complete the following section.

Declaration of Supervision:

I certify that I am a registered with the University of Warwick Climbing Centre as a competent climber and I will take full responsibility for the safety of a maximum of two Novice/Junior climbers. If supervising Junior, parental consent form must have been completed. I also confirm that the information I have filled out is correct and if any information changes I will notify the centre.

Personal details of SUPERVISOR

Title:	<input type="text"/>	First name:	<input type="text"/>	Surname:	<input type="text"/>
Date of birth:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>		<input type="text"/>	Supervisor signature:	<input type="text"/>

FOR STAFF USE ONLY

Supervisor's registration number:
(Gladstone ID number)