

UNDER 18 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.”

This Form must be filled out by the Parent or Guardian of the young person

Please complete the form in BLOCK CAPITALS.

First name:

Address:

Surname:

Gender: Male / Female / Prefer not to say

Date of birth: / /

Postcode:

Personal details of parent/guardian

Title First name Surname

Contact tel. no. Relationship to under 18

Email address

How did you hear about this climbing centre?

Medical information

Does the named Under 18 suffer from any medical condition that might make it more likely that they will be involved in an accident which could cause harm to themselves or others? (I.e. asthma, epilepsy, diabetes, heart problem, allergies etc.) Please state condition and any medication required. Please answer NO if they have no medical conditions.

Are there any reasons why your child should not participate in physical exercise?

The named Under18 undertakes exercise at their own risk. If they feel any pain, dizziness or other physical symptoms they should stop exercising and inform their instructor immediately. The Climbing Centre and its staff accept no liability unless negligence can be proven.

Parent/Guardian Acknowledgement that climbing is a hazardous activity with an element of risk

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.

- 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?
- Do you understand that failure on the part of the named Under 18 to exercise due care could result in their or others injury or death?
- Have you watched or undertaken the University of Warwick Bouldering Induction and do you understand the risks involved in bouldering?
- Do you consent to medical treatment being given if, in the opinion of a qualified medical practitioner, it is deemed necessary?
- Do you consent to First Aid being given by a suitably qualified member of Staff?
- Have you helped the named Under 18 to understand the Conditions of Use and explained that they must obey any instructions given by Climbing Centre Staff?
- Do you understand that the under 18 cannot climb unsupervised until they are over 14 years of age and have passed our 'competent junior' test?
- Do you understand that The Climbing Centre accepts no responsibility for loss, damage, or injury caused by or during attendance on any of the activities except where such loss, damage or injury can be shown to result directly from negligence on the part of the Centre or its Staff?
- Do you accept that the supervision of your child will be undertaken by the signed supervisor or as part of a University Instructed Session?

Parental consent: I am aware that climbing is an activity with a danger of personal injury or death.
I have understood the nature of the activity and accept the risks involved.
I consent to the named under 18 taking part in all Climbing activities.

Declaration of fact: I also confirm that the above information 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

Form correct?

Signature Date

THIS PART TO BE FILLED IN BY RECEPTION STAFF ONLY

Supervisor's registration number:
(Gladstone ID number)

For details of SUPERVISOR only

Title: First name: Surname:

Supervisor signature: Date of birth: / /