

REGISTRATION FORM FOR UNSUPERVISED BOULDERING ONLY AT CALSHOT ACTIVITIES 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

Title	<input type="text"/>	First Name	<input type="text"/>	Surname	<input type="text"/>
Male / Female	<input type="text"/>	Address	<input type="text"/>		
Date of Birth	<input type="text"/>	<input type="text"/>			
Home Tel. No.	<input type="text"/>	<input type="text"/>			
Mobile Tel. No.	<input type="text"/>	Post Code: <input type="text"/>			
Occupation	<input type="text"/>	E-mail address	<input type="text"/>		

Tick here if you wish to receive our e-mail news letter

Conditions of Registration


If you are under 18 years of age **DO NOT** fill in this form! Bouldering only registration is not available to under 18's. 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 give satisfactory answers to the questions will be registered and allowed to climb unsupervised.

	Please write YES or NO
Are you over 18 years of age?	<input type="text"/>
Have you read and understood the BOULDERING ONLY Conditions of Use and Rules of the centre?	<input type="text"/>
Do you understand the matting under the bouldering walls cannot remove the risk of injury?	<input type="text"/>
Do you agree to not use the top rope and lead walls as a climber or belayer or for Bouldering/traversing?	<input type="text"/>
Do you understand that if you do use the roped walls, having agreed not to, and another person is injured as a result of your actions then it is you and not the climbing wall that will be legally liable?	<input type="text"/>
Do you understand that failure to exercise due care could result in your injury or death?	<input type="text"/>
Do you have any questions regarding the application of the Bouldering Only Conditions of Use or rules?	<input type="text"/>
Are you experienced at bouldering?	<input type="text"/>
Do you agree to abide by the Bouldering Only Rules?	<input type="text"/>

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:

Signature	<input type="text"/>	Date	<input type="text"/>
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 (Some information on this form will be electronically processed in accordance with the Data Protection Act 1998)

