

# REGISTRATION FORM

UNDER 18 SUPERVISED CLIMBING AT BOULDERS



## Parent / Guardian – Emergency Contact

Emergency Contact Name 1	<input type="text"/>	Relationship	<input type="text"/>
Mobile Tel. No.	<input type="text"/>	Other Tel. No(s)	<input type="text"/>
Email Address	<input type="text"/>		<input type="text"/>
Emergency Contact Name 2	<input type="text"/>	Relationship	<input type="text"/>
Mobile Tel. No.	<input type="text"/>	Other Tel. No(s)	<input type="text"/>
Email Address	<input type="text"/>		<input type="text"/>

## Child Personal Details (only details different from above needed for shaded boxes)

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

<ul style="list-style-type: none"><li>In your child's interests, it is important that <i>boulders</i> staff should know whether he / she suffer from any illness or medical condition. Please use the space below to state, in confidence, anything which our staff should be aware of. Please also indicate if your child is taking any medication, with details and dosage, and / or specific dietary requirements.</li><li>I am aware that climbing is a physical activity and can certify to the best of my knowledge that any medical condition or ailment stated will not put them or anyone else at risk and that there is no reason why my child should not participate in physical exercise.</li><li>I confirm to the best of my knowledge that my son /daughter does not suffer from any medical condition other than those stated.</li><li>I consent to my child receiving medical treatment, which in the opinion of a qualified medical practitioner, may be necessary.</li><li>I understand that climbing is a hazardous activity with an element of risk and am happy for my child to partake in all the centre activities.</li><li>My child is over 5 years old.</li></ul>	<ul style="list-style-type: none"><li>I have had the activities of <i>boulders</i> explained and agree to my son / daughter taking part in these activities. I have read Conditions of Use and I understand and accept them.</li><li>I consent to my son / daughter travelling to and from <i>boulders</i> activities in a vehicle driven by a member of <i>boulders</i> staff should it be required.</li><li>I agree to take responsibility for them before and on completion of their session.</li><li>I confirm that my child is not subject to any court order prohibiting publication of their image and that I allow publication of the image for official <i>boulders</i> use only.</li><li>I understand that <i>boulders</i> accepts no responsibility for loss, damage or injury caused by, or during attendance on, any of their activities; except where such loss or damage can be shown to result directly from the negligence of <i>boulders</i>' staff.</li><li>I confirm that all the information on this form is correct and if any information changes I will notify the centre.</li></ul>
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Please state medical condition and / or medication (*continue overleaf if required*):

**Your child undertakes exercise at their own risk. If they feel any pain, dizziness or other physical symptoms they should stop exercising and inform a member of *boulders* Staff immediately.**

PARENT / GUARDIAN SIGNATURE	<input type="text"/>	Date	<input type="text"/>
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<b>THIS PART TO BE FILLED IN BY RECEPTION STAFF</b>					
Date	<input type="text"/>	Member	<input type="checkbox"/>	Non Member	<input type="checkbox"/>
Details	<input type="text"/>		Reg. No	<input type="text"/>	
Signature	<input type="text"/>				

STATEMENT FROM ROCK CLIMBING UK GOVERNING BODY, 'THE BRITISH MOUNTAINEERING COUNCIL'

"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".

