

REGISTRATION FORM

Unsupervised Climbing at walls operated by *Manchester Climbing Centre Ltd*

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

Questions marked with * **MUST BE FILLED IN**

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"/>			<input type="text"/>
*Tel. No.	<input type="text"/>	<input type="text"/>			<input type="text"/>
E-mail address	<input type="text"/>			Post Code:	<input type="text"/>
*Emergency contact name.	<input type="text"/>	*Emergency contact Tel. No.	<input type="text"/>		
How did you hear about this Climbing Centre?					
<input type="text"/>			<input type="text"/>		

Conditions of Registration

If you are under 18 years of age **DO NOT** fill in this form! Please ask at Reception for the correct form.

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.

* Are you over 18 years of age?	<input type="text"/>
* Have you read and understood the Conditions of Use and Rules of the centre?	<input type="text"/>
* Can you put on a climbing harness correctly?	<input type="text"/>
* Can you attach a rope to your harness using a suitable climbing knot?	<input type="text"/>
* Can you use a belay device to secure a falling climber and lower a climber from the wall?	<input type="text"/>
* Do you require assistance or instruction (from wall staff or otherwise) in any of the above three techniques (marked *)?	<input type="text"/>
* Do you understand that failure to exercise due care could result in yours or others injury or death? ...	<input type="text"/>
* Do you have any questions regarding the application of the Conditions of Use or the Rules?	<input type="text"/>
* Do you agree to abide by the Rules of the climbing centre?	<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:**

MCC and its associated walls may occasionally contact you with offers and centre news.

If you do not wish to receive communication from us please tick here

Signature

Date

THIS PART TO BE FILLED IN BY RECEPTION STAFF

Supervised?	<input type="text"/>	Sample Question Asked?	<input type="text"/>	Which Question Was Asked?	<input type="text"/>
Signature	<input type="text"/>			Date	<input type="text"/>
No Longer Requiring Supervision	<input type="text"/>			Date	<input type="text"/>
Form Signed At (Centre)	<input type="text"/>				