

HOTROCK CLIMBING WALL

YOUTH MEMBERSHIP FORM

Participation Statement: "... 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."

Personal Details

Parent/Guardian please complete the form in BLOCK CAPITALS, it is your duty to inform us of any changes to these details.

Guardian First Name _____	Last Name _____	D.O.B ____ / ____ / ____	M	F	Mem.No
Child 1 First Name _____	Last Name _____	D.O.B ____ / ____ / ____	M	F	
Child 2 First Name _____	Last Name _____	D.O.B ____ / ____ / ____	M	F	
Child 3 First Name _____	Last Name _____	D.O.B ____ / ____ / ____	M	F	

Address _____
 _____ Post Code _____

Email _____

Guardian/Emergency Contact 1	Guardian/Emergency Contact 2
Full Name _____	Full Name _____
Mobile No _____	Mobile No _____
Landline No _____	Landline No _____

Condition of registration

Once you have read the Rules and Regulations of the Hotrock Climbing Wall, you must answer the following questions by writing **YES** or **NO** in the box provided and 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 legally responsible for the above named young person/s?	<input type="checkbox"/>
Have you received, understood and agreed to abide by the Regulations and Procedures of the Hotrock Climbing Wall?	<input type="checkbox"/>
Can you correctly fit and fasten a harness?	<input type="checkbox"/>
Can you attach a rope correctly to you and your child's harness using a figure of eight knot?	<input type="checkbox"/>
Can you belay your child competently using a recognised belay device?	<input type="checkbox"/>
Do you & your child understand that climbing holds can and do spin regularly?	<input type="checkbox"/>
Are you & your child aware of the importance not to walk or climb beneath another climber?	<input type="checkbox"/>
Do you & your child understand that the matting under the climbing walls does not guarantee your safety?	<input type="checkbox"/>
Do you understand the risks associated with an auto-belay device?	<input type="checkbox"/>

Do you require any instruction in the above? If yes a competent climber must fill in below.
 I (full name) will take full responsibility for the named person on this form.
 I am competent to do so. Signature: _____ Membership No:

Do you understand that failure to exercise due care could result in your or another's injury or death?	<input type="checkbox"/>
Do you have any questions regarding the application of the Conditions of use or the Rules?	<input type="checkbox"/>

Declaration of Fitness

I certify that to the best of my knowledge that the child/children named above 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 others or myself.

Declaration of Fact

I also confirm that the above information is correct and if any information changes I will notify the wall staff:

Guardian's Signature: Date: ____ / ____ / ____

This part to be filled in by Hotrock Climbing Wall/Tollymore National Outdoor Center staff.

Staff Name: _____ Have you asked sample question?

Logged Date ____ / ____ / ____