



Adult Unsupervised Bouldering Registration

Membership
Number:

**This form is for adults aged 18years and over. If you are no 18year +, ask at reception for another form.
PLEASE PRINT CLEARLY**

First name:		Address	
Surname:			
Male:		Female:	
Date of Birth			
Telephone:		Post Code:	
Email:			

Once you have read the Bouldering Only Conditions of Use and Rules overleaf, 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.

1	I am aged 18 or over.	
2	I am competent to take part in bouldering activities and understand and accept the risks involved.	
3	I understand the need for, and will use a spotter where appropriate.	
4	I understand that matting under the walls does not prevent injuries and that broken and sprained limbs are common injuries despite the matting?	
5	I understand that failure to exercise due care could result in injury or death to myself and others.	
6	BMC's 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" I understand and accept this statement.	
7	I have read, understood and accept the GCC's Bouldering Conditions of Use (Overleaf).	
8	I agree not to take part in ANY roped climbing at the Glasgow Climbing Centre.	
9	If I decide to take part in roped climbing I agree to register as a full climber member.	
10	I accept that neither the operating company nor its employees shall be liable for any loss or injury arising from my participation in activities at Glasgow Climbing Centre and that nothing within the terms of this consent shall affect any statutory rights.	

Declaration of Fitness I certify that to the best of my knowledge, I do not suffer from a medical condition which may affect my ability to participate safely in the above activities.

Declaration of fact I confirm that the above information is correct and if any information changes I will notify the centre.

Signed _____ Date _____

Official Use Only: To be completed by qualified GCC staff			
Name		Date	
I have disclosed the risks involved in bouldering to the person named above and asked 1 sample questions which was answered correctly.		Signed:	

Day, re or reg	Entry	Novice	Hire	Total	Pay Type	Till #	Rung up