



Date					
Total					
Inv	Y	N	Rung up	Y	N
PLEASE TICK	CASH	CARD	CHEQUE		

BMC 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"

Instructor 1	Memb:		
	Qualification:		
	First Aid:		
Instructor 2	Memb:		
	Qualification:		
	First Aid:		
Group Leader 1			
Organisation / Provider	Memb:		
Address:	Insurance:		
Post Code			
Email			
Telephone			

I accept responsibility for the names listed below and confirm that I have read and understand the BMC Participation Statement and the Glasgow Climbing Centre's Terms and Conditions of use. I am working on behalf of the organisation above which has provided proof of insurance for this session.

Senior Instructor (signed).....

1.	Participants Name	7.	Participants Name
	A S J B H £		A S J B H £
2.	Participants Name	8.	Participants Name
	A S J B H £		A S J B H £
3.	Participants Name	9.	Participants Name
	A S J B H £		A S J B H £
4.	Participants Name	10.	Participants Name
	A S J B H £		A S J B H £
5.	Participants Name	11.	Participants Name
	A S J B H £		A S J B H £
6.	Participants Name	12.	Participants Name
	A S J B H £		A S J B H £