

novice supervision form

for participants under the supervision of a Craggy Island member



indoor climbing
guildford

novice's details: Please complete this form using BLOCK CAPITALS

Participation 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 injury or death. Participants in these activities should be aware of and accept these risks and be responsible for their own actions and involvement".

first name	surname
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address

postcode

age and date of birth | tel. number

email address

from time to time we send information and special offers to our customers which are both relevant to the activity you have undertaken and we feel will be of interest to you. If you do not wish to receive these, please tick here:

emergency contact name	contact number
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(This is the person we will contact in case of emergency. If novice is under 17 years of age, please use parent or legal guardian as the emergency contact name and ensure they sign at the bottom of this form.)

"I, the novice, have read and understood the participation statement and agree to the Terms & Conditions of Use for Craggy Island (printed on reverse) and agree to be supervised by the above named registered climber. I choose to participate in climbing and bouldering activities of my own free will and accept the associated risks."

signed | date

(parent/guardian should sign if participant is under 17 years of age)

supervisor's details:

to be completed by the member/s taking responsibility for the novice

"I will take full supervisory responsibility for the novice as named below and realise that supervising means I will not be able to climb without a second supervisor/registered climber present. I will take full responsibility for the correct tying of knots, fitting of harness, safe belaying and explaining safe use of the centre."

Supervisor name | signed | date

If more than one supervisor is taking responsibility for the novice then the second supervisor should sign below

Supervisor name | signed | date