



Rock Action Sport

# Booking Form

5/6<sup>th</sup> May 2012

9/10<sup>th</sup> June 2012

## Details of person attending course

First Name		Last Name	
Address			Postcode
Date of Birth		Age	
Email		Phone	

## Climbing experience

What level are you climbing at? Briefly explain some of the climbs you have done in the last 6 months to demonstrate this level. Include any of indoor/trad/sport/bouldering which are relevant.

How long have you been climbing?

What would you like to get out of this course?

## Personal Information

Medical conditions (illnesses/injuries)	Also include any medication you are currently taking	
Emergency contact	Please include a name, telephone number and their relationship to you	
Dietary requirements		

## Payment

To secure your place you need to pay a £50 non-refundable deposit (see terms and conditions). One month prior to the week, the remaining balance will be payable.

### Payment method

I wish to pay by cheque (made payable to Love to Climb)

I wish to pay by bank Transfer (please request account details)



Amount to be paid

£.....

## Declaration for the Acceptance of Risk

### Please read the following carefully

Participation in rock climbing and outdoor activities entails some risk of injury. Thornbridge Outdoors and Lovetoclimb staff are trained to deliver the activities included in this course and will act in a manner to reduce the risk of injury. However, participants and their guardians must understand that there are risks inherent in rock climbing and outdoor activities that cannot be completely eliminated and, even if reduced to a seemingly acceptable level, there will remain the chance of unpredictable occurrences which may result in injury.

### Booking declaration

- I have read the above, accept that there are risks involved and I understand that they cannot be totally eliminated
- I have read, understood and agree to the Lovetoclimb terms and conditions
- I understand the supervision arrangements of the course and accept that there will be times when participants will be remotely supervised
- I agree to photographs of the week being downloaded on to a memory stick and/or CD for group participants and photographs being used for advertising purposes

### Signature of applicant:

	Date	
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### Countersignature of parent or guardian

Name		Signed	
Relationship to applicant:		Date	

### Finally...

How did you find out about this course?

- Leaflet
- Internet. If so via which websites .....
- Recommendation

Other .....

### Please return this form to

*Katherine Schirmacher 110 Sandford Grove Road, Sheffield S7 1RT*