

### Where the participant is under 16 years of age:

I \_\_\_\_\_ being the parent/guardian of \_\_\_\_\_

Aged: (please tick)  7-11  12-16

Contact Phone: (work) \_\_\_\_\_ (home): \_\_\_\_\_

IN CONSIDERATION OF the persons named above: I acknowledge that there is a risk involved in the sport of indoor climbing and release Summit Indoor Climbing Centre from any liability for damages, loss or injury which may be incurred by the persons named above or which they may cause to any other person whilst on the premises of the Summit Indoor Climbing Centre. In the event of an injury, I authorise Summit Indoor Climbing Centre to contact an available doctor, hospital or ambulance service for treatment at my expense.

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Parent/Guardian, if under 16 years)

**Please Note:** Children under 12 years will require adult supervision and are not allowed to belay.

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