



REGISTRATION FORM

For Schmooling at **NAME OF CENTRE**

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.”

Personal Details

Please complete the form in **BLOCK CAPITALS**.

Title First Name Surname

Male / Female Address

Date of Birth

Evening Tel. No.

Daytime Tel. No.

Occupation E-mail address

Post Code:

How did you hear about Schmooling?

Conditions of Registration

If you are under 18 years of age **DO NOT** fill in this form! Please ask at Reception for the correct form.
 Once you have read the **Conditions of Use and Rules** of the climbing centre, you must answer the following questions by writing either **“YES”** or **“NO”** “ACCEPT/Decliner” in the box provided then sign the declaration at the bottom of the form. Only Schmoolers/climbers who give satisfactory answers to the questions will be registered and allowed to Schmool unsupervised.

Are you over 18 years of age?

Have you completed, read, understood and accept the Conditions of Use and Rules of **Name of Centre**?

When belaying a Schmooler (someone using the dry tools (Schmoolz)) I understand that the rope must be kept taught for the initial moves to prevent deck-outs.

When leading with the Schmoolz I understand I must pre clip at least 2 quickdraws in a 'normal' way before ascending using the Schmoolz.

I understand that when on roped climbs a leash must be used to attach the tools to the Schmooler.

I understand that I (a Schmooler) must give way (allow to climb first) to any 'normal' climbers on adjacent routes.

I understand that bouldering with the Schmoolz is strictly forbidden unless in an area that has been set/cordoned off and when allowed to do so, leashes are not to be used.

I understand that I should not dyno or jump for holds with the Schmoolz (as per the manufacturers recommendations) whether on roped or non-roped climbs.

I have been advised of the use of head protection to prevent head injuries and have **Accepted/Declined** to wear an approved helmet. ...

Declaration of fitness

I certify that to the best of my knowledge, I do not suffer from a medical condition which might have the effect of making it more likely that I be involved in an accident which could result in injury to myself or others.

Declaration of fact

I also confirm that the above information is correct and if any information changes I will notify the centre:

Signature Date

THIS PART TO BE FILLED IN BY Centre STAFF

Registration Number Registration Type

Amount Paid for Registration £ Have you asked a sample question?

Signature Date