

# Rockface Enrolment Form

1 Participant's details

Membership Number:

Please complete using BLOCK LETTERS. The person whose details are written in this section is the **Participant** in this document.

Given/First name(s):					
Surname/Family Name:					
Date of Birth:	DD / MM / YYYY	Gender (please tick):	Male:		Female:
Home Phone Number:			Mobile Phone Number:		
E-mail Address:	(Rockface would like to notify you of competitions, gym news, member specials, etc. Your details will be kept confidential and will not be given or sold to other organisations)				
Street Address:					
Suburb:		Post Code:		Country:	(if other than Australia)

How did you hear about the Rockface?

- (a) A friend introduced me to Rockface:
- (b) I found Rockface on the web:
- (d) I found Rockface in the Yellow Pages:
- (f) Other (Please describe):

Friend's name

Membership number

- (c) I visited with a school, club or organization:
- (e) I read about Rockface in a magazine/newspaper:

## Participant's acknowledgments

The participant acknowledges that:

- (a) There is an inherent risk of injury in climbing due to equipment failure, falling objects, human error and any combination thereof. The Participant voluntarily accepts and assumes the risk of injury due to any of these causes and understands the inherent risks associated with climbing.
- (b) Rockface has no qualified medical assistance available and the Participant accepts the risk that in the event of an injury requiring medical treatment, the Participant will have to obtain such assistance from an independent source.

## Participant's health

The Participant warrants that he or she has no medical condition that will affect his or her ability to perform climbing.

## Rules

The Participant has read the rules and agrees to comply with the Rules of Rockface and agrees to comply with those rules at all times whilst in Rockface.

## Where Climber under 18

The Participant's parent/guardian acknowledges and agrees that the sport of rock climbing and the use of the facilities owned and maintained by Rockface has inherent risks of injury. The Participant's parent/guardian realises that the Participant may suffer injury from climbing, and that the highest safety standards and equipment cannot remove all of the dangers to the Participant.

I HAVE READ, AND UNDERSTAND, THE TERMS OF THIS DOCUMENT. IN RETURN FOR BEING ABLE TO USE THE GYM, I AGREE TO BE BOUND BY ALL TERMS OF THIS DOCUMENT.

Participant's Signature

Date

If Under 18, signature of Participant's parent/guardian

Date

Signed on behalf of Rockface