

Climbing Registration and Release

Name: _____ Age: _____ D.O.B. _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (H) _____ (W) _____ (C) _____

Emergency Contact: _____ Relationship: _____

Phone: (H) _____ (W) _____ (C) _____

Climbing Experience: _____

Registering For: (circle all that apply)

Kids Climbing Class

Open Wall

Adult Technical Skills Class

I _____ am releasing the Cortland County Family YMCA and the program staff responsible for conducting lessons and wall supervision of all financial and legal liability resulting from my/my child's injury or death, **even in the case of negligence**. I understand that **climbing can be dangerous** if the proper equipment, training, and supervision are not used. I understand that climbing has foreseeable and unforeseeable risks, including **injuries to fingers, wrist, muscles, back, neck, and head**. I agree to follow all the rules and regulations regarding the climbing wall, and understand that I am responsible for my own actions, the actions of those I am responsible for, and the consequences that may result from them.

(Please initial below)

___ I have read and **understand** the above statement.

___ I understand that **climbing can be dangerous if not properly conducted**.

Signature _____ Date _____

Witness _____ Date _____

Minors/Children

In consideration of (child) _____, I (parent/guardian) _____, the responsible party for the minor above **assume all legal and financial responsibility, even in the case of negligence** on the YMCA staff's behalf.

___ I have read and understand the above statements.

___ I have read this **entire document** over with my child(ren), and they understand.

Parent/Guardian Signature _____ Date _____

Witness _____ Date _____