

Form of Understanding

Climbing is usually viewed as a risky activity. Typically, rock climbing (including trad climbing, sport climbing, bouldering and all other disciplines, both indoors and outdoors) is seen as an activity with a risk of injury or death.

This form is a requirement of Prowess' public liability insurance and shows that you understand these risks and accept that in order to participate in any Prowess Climbing Coaching session, this file must be completed by you – the client – and in the event of under-18s, counter signed by a parent or guardian.

This information will be considered strictly confidential and will only be shared with insurance companies (and only when requested) with knowledge of this being shared with yourself.

We often take photographs for use in promotional materials, including on social media. If you do not wish to appear in these photographs, please let us know by ticking the box here:		
Section 1: Personal Details		
Name of client:		
Contact telephone number:		
Home address:		
Contact email address:		
Mountain Training ID number (for course participants)		
Date of Birth:		
If climber is under 18 years old, please complete Section 2		
Section 2: Under 18s Name of parent or guardian:		
Relationship to climber:		
Emergency contact		

Section 3: Relevant Information

number:

This section refers to any medical issues the climber may be suffering from. It is twofold: to help prevent making any injuries worse and in the event of a medical issue. Please be honest. These forms are kept strictly confidential.





lease state any current injuries you may be dealing with. Please be specific:	
lease state any medical conditions we should be aware of that may affect performance. Please becific:	 эе
lease state any medical conditions that should be disclosed to emergency services in the unlikely vent of serious illness. Please be specific:	\neg
lease use this space to let us know of anything else you think we should know. For example, is there ny extra support we could provide or reasonable adaptations we could make that would help you	U
et the most out of your time with us? This could be your preferred pronoun if you have one, the fact that you are Autistic or have ADHD, any life circumstances that you are going through which may ffect your participation etc. We will treat this information confidentially unless you tell us otherwise in the reply:	
ection 4: Declarations nis section is a series of declarations by yourself (if over 18) and countersigned by a legal arent/guardian (if under 18).	
ection 4a: Over 18s understand that climbing and bouldering are activities that have inherent danger and while all ste will be taken to minimise risk, these activities remain potentially dangerous. As such, I agree to adhe ny and all safety instruction.	•
confirm that all equipment provided by myself is in good condition and is safe for the activity. If eemed unsafe, I agree to use alternative equipment or potentially, agree to end the session early.	
take responsibility for my own actions, declare that I am in a good physical condition to engage in ctivity and agree to participate in the session	า the
ame:	
gned:	
ection 4b: Parental Consent for Under 18s understand the above statements (Section 4a) and confirm that I am the legal guardian of the articipant. I consent to my child participating in the activity.	
ull name:	
gned:	