

# Plas Madoc Climbing Wall Group signing in form

Instructor 1: ..... Qualification: .....

Instructor 2: ..... Qualification: .....

Instructor 3: ..... Qualification: .....

Name of institution .....

Address.....

.....

.....

Tel number .....

Number of instructors .....

Number of students UNDER 18YRS ..... OVER 18yrs .....

Total number .....

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By signing below I confirm that:

1. The group has an appropriate number of qualified instructors for the type and size of the group. Plas Madoc normally recommends a ratio of 1:8.
2. The instructors named above have a minimum of the Single Pitch Award (SPA) or military equivalent.
3. The organisation sending the group has adequate liability insurance.
4. Due to the nature of the activity we strongly recommend that you consider taking out your own personal accident insurance.

SIGNED ..... DATE .....

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Method of payment (tick one box):

Invoice  cash  cheque  card

# Plas Madoc Climbing Wall

## Signing in sheet for novices & U18's

### Plas Madoc member

As an experienced climber you are permitted to sign in up to two U18's or novices, provided that you are prepared to take full responsibility for them during their visit to Plas Madoc. Before signing them in please consider the following points:

- The novices or U18's must stay with you at all times.
- Teaching novices to belay is **strongly discouraged** unless you have experience of how to do this safely.
- Be extremely cautious about allowing U18's to belay you.
- U18's should also be very carefully supervised in the bouldering areas and must under no circumstances be allowed to run or play on the mats.

Please sign below to accept full responsibility for the U18's / novices you will be supervising:

**By signing below you are confirming that you have read and understood the above points and that:**

1. You are now looking after the novices / U18's below on a professional basis.
2. You are the parent or legal guardian of the child(ren) named below, or have the permission of their parents or guardians to bring their child(ren) here to climb.

**Print name:** ..... **Signature** .....

**Date:** ...../...../.....

### U18's

Names of U18's:

1: ..... 2: .....

### Novices (adult)

Please sign below to indicate that you have read the 'BMC participation statement' on the counter and that you have confidence in the Plas Madoc member that is signing to look after you.

**Name of novice 1:** ..... **signature** .....

**Name of novice 2:** ..... **signature** .....

**Novices introduced by Plas Madoc members are encouraged to consider a Plas Madoc Intro course if they are serious about learning to use the climbing wall safely. In any case all novices will be expected to pass a Plas Madoc assessment before being allowed to register as a Plas Madoc member. Please ask for details.**

**Due to the nature of the activity we strongly recommend that you consider taking out your own personal accident insurance.**