

Climbing Wall Use

MEMBER# _____ NON-MEMBER _____

NAME _____ AGE _____ DATE _____

ADDRESS _____ DAY PHONE _____

CITY _____ STATE _____ ZIP _____ NIGHT PHONE _____

DESK PERSONS SIGNATURE _____

**Agreement for Climbing Wall Participation
and Acknowledgment of Risk**

I AM AWARE that climbing is a dangerous activity involving severe physical stress and potential for injury. I understand that climbing involves certain risks, including but not limited to, falling to the ground. I understand that my participation in climbing and related activities exposes me to risk, and may result in injuries including but not limited to, death, serious neck and spinal injuries resulting in complete or partial paralysis, brain damage, and serious injury to virtually all bones, joints, muscles, and internal organs. I further understand that climbing involves a particularly high risk of tendon and joint injury, especially in the fingers, wrists, hands, elbow and shoulder. In addition, I understand that participating in climbing wall activities involves activities incidental thereto, including, but not limited to travel to and from the climbing wall through or around the fitness area, and the possible reckless conduct of other participants. **I am voluntarily participating in this activity with knowledge of the danger involved** and hereby agree to accept any and all inherent risks of property damage, personal injury, or death.

(Signature of Participant) (date)

(Signature of Parent if Participant is under 18) (date)