



LAUNCESTON INDOOR ROCK CLIMBING LIABILITY RELEASE FORM

Membership Application & Waiver of Liability

This is an important document which affects your legal rights and obligations. Please read it carefully and do not sign unless you are satisfied that you understand it. If you are under 18 a parent or guardian is required to do this for you.

You must answer all points yes if you agree and complete all of participants details in BLOCK LETTERS.

I understand that indoor climbing involves risks that may cause various injuries and that such injuries may result in death or serious disability. I also understand that indoor climbing is physically demanding and in susceptible people may cause panic, hyperventilation or heart attack.

I have been advised of the risks of indoor climbing. I wish to participate and do so entirely at my own risk of injury or bodily harm to myself.

I hereby release Launceston Indoor Rock Climbing(LIRC), Leap of Faith Pty Ltd the owner of the premises and all employees, staff and assistants of LIRC or any other persons involved in my participation in indoor climbing at LIRC from any suit, demand, action or claim for compensation whether for personal injury or damage to property arising from my participation.

I am aware that this waiver is ongoing and will apply to all future occasions I participate in indoor climbing at Launceston Indoor Rock Climbing. I furthermore acknowledge that this document is contractual and may be relied upon in any proceedings by me, my heirs, executors and assigns.

My parent or legal guardian has signed this form to consent to my participation or I am aged 18 or over and am legally competent to sign this agreement.

FIRST NAME: _____

SURNAME: _____ DOB: _____ SEX – M / F

ADDRESS: _____

_____ POSTCODE: _____

PHONE: _____ EMAIL: _____

EMERGENCY CONTACT: _____ PHONE: _____

SIGNATURE _____ INDIVIDUAL/PARENT/GUARDIAN