

Participant Information

Please Print CLEARLY

**Name(s)** \_\_\_\_\_

**Address** \_\_\_\_\_ **Home Phone** \_\_\_\_\_

**City, State, Zip** \_\_\_\_\_ **Work Phone** \_\_\_\_\_

**Email** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

**Acknowledgement of Risk, Release of Liability, Waiver of Claims, Covenant Not to Sue**

I hereby acknowledge and agree that the sport of rock climbing and the use of the Climbing Wall located with the Town of Parker Fieldhouse has inherent risks. I have full knowledge of the nature and extent of all the risks associated with indoor climbing and the use of the Climbing Wall and I fully and completely agree to assume all of the risk both known and unknown, including, but not limited to:

1. All manner of injury resulting from falling off the Climbing Wall and hitting rock faces and projections, whether permanently or temporarily in place, on the floor;
  2. Rope abrasion, entanglement, and other injuries resulting from activities on or near the Climbing Wall, such as, but not limited to, climbing, belaying, rappelling, lowering on rope, rescue system, aid climbing, lead climbing, and any other rope techniques;
  3. Injuries resulting from falling climbers or dropped items, such as, but not limited to, ropes, climbing holds, or climbing hardware;
  4. Injuries resulting from failure of equipment, including both user provided equipment and equipment provided by the Town of Parker.
  5. Cuts and abrasions resulting from skin contact with the Climbing Wall;
  6. Failure of ropes, slings, harnesses, climbing hardware, anchor points, or any other part of the Climbing Wall structure.
- I further acknowledge that the above list is not exclusive of all possible risks associated with the use of the Climbing Wall and that the above list in no way limits the extent or reach of this release and covenant not to sue.
  - In consideration of my use of the Climbing Wall, the undersigned user, agrees to indemnify, hold harmless and release the Town of Parker and its officials, employees, contractors and agents from any and all causes of action, claims, demands, losses, or costs of any nature whatsoever arising out of or in any way relating to my use of the Climbing Wall.
  - I hereby certify that I have full knowledge of the nature and extent of the risks inherent in the use of the Climbing Wall and that I am voluntarily assuming the risks. I understand that I will be solely responsible for any loss or damage, including death, I sustain while using the Climbing Wall, and that, by this agreement, I am releasing The Town of Parker and it's officials, employees, contractors and agents of any and all liability for such loss, damage, injury or death.
  - I further certify that I am in good health and that I have no physical limitations, which would preclude my safe use of the Climbing Wall.
  - I certify that I read and understand the climbing wall policies posted in the climbing wall area.
  - I certify that if the climber is under 18 years of age, he/she has my permission to be belayed by certified belayers, who have successfully passed the Climbing Wall Orientation and have a Belay Certification. I understand that the Certified Belayer is in no way responsible for any loss or damage, including death, sustained by the climber while using the Climbing Wall, and that, by this agreement, I am relieving The Town of Parker, it's officials, employees, contractors and agents of any and all liability such as loss, damage, injury or death.
  - I give my consent to use any photographs or videotape taken of me (my Child) while participating in Climbing Wall activities in future promotional or marketing materials.

*PLEASE READ THIS DOCUMENT IN FULL BEFORE SIGNING*

By signing this document, I certify that I am at least **18 YEARS OF AGE** and that NO OTHER REPRESENTATIONS HAVE BEEN MADE TO ME THAT CHANGE, ALTER, OR MODIFY ANYTHING WITHIN THIS WRITTEN AGREEMENT. I UNDERSTAND THAT CLIMBING IS DANGEROUS. I HAVE HAD SUFFICIENT OPPORTUNITY TO READ AND UNDERSTAND THIS DOCUMENT. I AGREE TO BE BOUND BY ITS TERMS. IN ADDITION, if the participant listed above is under age 18, I state that I am the parent or LEGAL guardian of said participant and I agree to each of the above terms on his or her behalf, and I understand that said participant must sign their own waiver upon turning age 18.

**Signature of Participant** \_\_\_\_\_ **Date** \_\_\_\_\_  
 (Parent or legal guardian if under age 18)

**Print name of signatory above** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

Sign Back Also ↗

**This section is for Parker Recreation Staff ONLY**

In Active	Initials	In CW Waiver Log	Initials	Belay Certification Passed	Initials
_____	_____	_____	_____	____/____/____	_____

# Town of Parker Climbing Wall Rules

1. All Climbers must check in at the front desk.
2. No one is permitted to belay or tie themselves in until they pass the Town of Parker safety check.
3. A helmet is recommended and can be provided at no charge.
4. **Children under 10 must be accompanied and supervised by an adult.**
5. You must be 14 years of age or older to pass the belay qualification test and belay.
6. Do not belay directly off floor anchors; they are only for backup.
7. Climbers who are climbing without a rope must keep to the bouldering rock.
8. No one is allowed to tighten, loosen or move holds without authorization of a manager.
9. Please report loose holds, bad wear spots on ropes and anything you believe to be a safety hazard.
10. Only commercially manufactured climbing equipment in good condition is allowed.
11. Spectators are to stay outside of the climbing area.
12. When belaying you are at NO time to have your break hand leave the rope.
13. Closed toe shoes are required for climbing.
14. No using bolt holes as holds.

**BY SIGNING BELOW SIGNIFY THAT I HAVE READ AND I UNDERSTAND THE TOWN OF PARKER CLIMBING WALL RULES.**



X

*Participant or Parent's Signature*

Date Signed: \_\_\_\_\_