DUBLIN CLIMBING CENTRE

Over 18'S GROUP/PARTY SUPERVISION FORM

This form to be used where groups being supervised by either in-house or external instructors from a different organisation.

Each adult in the group is required to fill out this form

Please list all taking part in the session.

We would like to draw your attention to Mountaineering Ireland's (MI) participation statement.

"Mountaineering Ireland recognises that Climbing, Bouldering and mountaineering are activities with a danger of personal injury or death. Participants in these activities should be aware of and accept these risks and be responsible for their own actions and involvement. "

I am aware that climbing and mountaineering are activities with an inherent danger of personal injury or death. I understand the nature of the activity and accept the risk involved and have read the Conditions of Use and Rules of the Dublin Climbing Centre.

I certify that to the best of my knowledge, I do not suffer from a medical condition which might have the effect of making it more likely that I be involved in an accident which could result in injury to myself or others.

I have read and acknowledge Mountaineering Ireland's participation statement.

NAME	MEDICAL CONDITIONS or additional	I have read and understand the
	needs write "NONE" or condition if any	rules and conditions -Sign here
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		

I agree that any photos/video taken during the party will ONLY feature participants from my own group and understand that sharing of such photos should only be done with the permission of the parents of children listed above.

Name of Group (if any)_____

Name of Group Leader _____

Address

Telephone

Signed_____ Date_____ Date_____