



Brisbane's Heart of Indoor Climbing  
ABN 39 105 542 050

# WAIVER, CONSENT, RELEASE AND INDEMNITY

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<b>Office Use Only</b>	
Belay <input type="checkbox"/>	Climb <input type="checkbox"/>
Info: _____	
Student: exp     /     /	
Membership Number	

## PARTICIPANT DETAILS (\*mandatory fields)

Dr/Mr/Mrs/Miss/Ms\* \_\_\_\_\_ (Surname) \_\_\_\_\_ (First Name)

Date of Birth\* \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Sex [please circle] Female Male

Occupation\* \_\_\_\_\_ Email\* \_\_\_\_\_

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

Suburb\* \_\_\_\_\_ Postcode\* \_\_\_\_\_ Mobile\* \_\_\_\_\_

## EMERGENCY CONTACT DETAILS

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Contact Number \_\_\_\_\_

**CLIMBING IS A DANGEROUS RECREATIONAL ACTIVITY WITH OBVIOUS RISKS AS DEFINED BY THE CIVIL LIABILITY ACT 2003. IF YOU PARTICIPATE, YOU DO SO AT YOUR OWN RISK. TO ENSURE THAT YOU UNDERSTAND THIS, PLEASE READ THIS FORM AND TICK IN THE BOX PROVIDED IF YOU AGREE.**

I am aged 18 years or over and am legally competent to sign this agreement. <b>[Please skip next question if you tick this]</b>	<input type="checkbox"/>
I am under the age of 18 years and my parent or legal guardian signs this form to consent to my participation on my behalf, and answers on my behalf, the following questions:	
Guardian Name _____ Signature _____	<input type="checkbox"/>
Relationship _____ Date _____	
I understand that indoor climbing involves risks which may cause various injuries that may result in death or serious disability. I understand that indoor climbing is physically demanding and in susceptible people may cause panic, hyperventilation or heart attack. I wish to participate and voluntarily assume the risk of injury or bodily harm to myself.	<input type="checkbox"/>
I hereby release and indemnify Urban Climb Pty Ltd, its servants and agents, the owner of the premises and any other persons involved in my participation in indoor climbing at Urban Climb from all actions or claims for compensation arising from my participation for personal injury or damage to property.	<input type="checkbox"/>
I agree that this waiver is ongoing and will apply to all future occasions I participate in indoor climbing at Urban Climb.	<input type="checkbox"/>
I acknowledge that this document is contractual and may be relied upon in any proceedings by me, my heirs, executors and assigns, and this waiver release and indemnity is given in consideration of Urban Climb Pty Ltd permitting me to participate in indoor climbing at Urban Climb.	<input type="checkbox"/>
I agree to comply with all instructions given to me by Urban Climb Pty Ltd relating to my participation in indoor climbing. I agree to indemnify Urban Climb Pty Ltd, its servants and agents and the owner of the premises against all liability that may incur, including legal costs, caused by my negligence or failure to comply with such instructions.	<input type="checkbox"/>
I warrant that I do not suffer from any medical condition that may affect my ability to participate safely in strenuous exercise.	<input type="checkbox"/>

**I agree that Urban Climb may use any photographs taken at Urban Climb containing my image in promotional material and I waive any claim I may otherwise have in respect of that use.**

Participant Signature	Today's Date
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I consent to Urban Climb sending me its promotional in any form until such time I notify in writing to the contrary. I understand I can do so at any time. Please tick.  No – don't send me anything  No – don't invite me to pizza nights!!  Yes – bring on the crank'n parties!

## Safety induction received and passed

Instructor Name and date of demo	I have received and understood this instruction and demonstration.
	Signature of Participant