



Supervised Junior Registration Form

for all individual young people under 18yrs being supervised by MECW instructors



Your personal data and privacy

In order for your child to use our facilities, we (Mile End Climbing Wall) require you to fill in all the information on this form. We recommend you read the privacy notice available at reception or at www.mileendwall.org.uk/compliance/privacy-notice. All the data contained on the completed form will be processed in accordance with this notice.

Young person's details (please complete in BLOCK CAPITALS)

First Name:

Surname:

Date of birth:

Parent/guardian details (please complete in BLOCK CAPITALS)

First Name:

Surname:

Postcode:

Email:

Telephone number(s):

Please provide us with an alternative contact (in case we can't get hold of you in an emergency)

I confirm that I have the permission of the person named below for their data to be shared with Mile End Climbing Wall as my contact in case of emergency.

Emergency contact name:

Emergency contact no:

IMPORTANT INFORMATION FOR PARENTS AND GUARDIANS

The British Mountaineering Council issues the following advice to those participating in any climbing activity:

Climbing is an activity with a risk of personal injury or death.

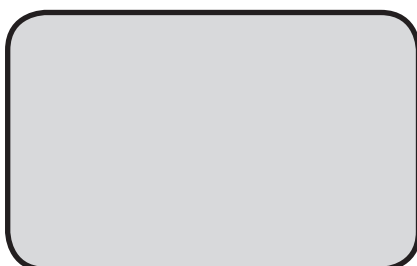
As the Parent or Guardian of the person named on this form you must indicate that you understand and accept that your child will be exposed to these risks whilst engaged in climbing activities.

Do not use any Mile End Climbing Wall facilities if you are unwilling for your child to be exposed to these risks.

Mile End Climbing Wall will provide appropriate supervision and conform to Governing Body recommendations; however the nature of these activities means that your child may not be under direct supervision at all times whilst engaged in climbing activities.

You should read and discuss the Centre Guidelines with your child.

As the legal parent/guardian of the above named child please write the word **YES** in the box below if you have read, understood and accept the information and warnings printed above. Then please sign and date the form.



Signature:

Date:

MECW Staff only

Staff member:

Reg No