

Climbing4all



please complete one form per person

full name:

title:

address:

postcode:

telephone (day):

(evening):

mobile:

email:

age:

occupation:

course or description of guiding service

dates

next of kin details

name:

relationship:

address:

telephone day:

evening:

previous experience (this helps us to tailor your programme so the more information you provide the better)

continue on a separate sheet if necessary

payment details

total cost:

less deposit of £100:

Balance:

Payment by Cheque:

Please make cheques payable to Sarah Kekus

Alternatively our Bank Details are:

Lloyds TSB

50 Main Street, Cockermouth CA13 9LU

Account No: 13041460 Sort Code: 77-56-09

declaration

I understand that mountaineering is inherently dangerous and I fully accept the risks involved. I agree to follow the advice and accept the decisions made by climbing4all regarding all safety issues.

Signed:

medical declaration

Please declare any medical conditions relevant to the course (e.g. allergies and long standing injuries) and any regular medication you are taking.

The above information is full and accurate and I am not aware of any health problem that could affect my ability to undertake the planned activities.

Signed: