



Dorset Climbing Activities

Course Booking Form. Please Complete one form per person

Personal Details

Title _____ First Name _____

Surname _____

Age _____ Date of Birth _____

Address _____

Postcode _____

Home Telephone _____

Mobile _____

E-Mail _____

Medical Details

Please provide details of any medical information, treatment, medication or allergies that may affect your participation in the course.

Name and phone number of a person we can contact in an emergency.

Course Details

Title _____

Dates _____

Course Fees

The full fee for the booking is due 8 weeks in advance. A non-returnable deposit of 25% of the full fee is due if booking more than 8 weeks from the course start date, with the remainder due 8 weeks in advance.

If the date of the booking is less than 8 weeks from the course start date the full fee is due.

Full course fee: £ _____

I enclose a deposit of: £ _____
(if more than 8 weeks before the course starts)

I enclose the full course fee of: £ _____
(if less than 8 weeks before the course starts)

I enclose a cheque payable to Dorset Climbing Activities Ltd for the appropriate amount.

Booking Conditions

Please read the terms and conditions on the separate page and then read and sign below to accept the terms and conditions.

1. I have had brought to my attention the terms of this booking, particularly those relating to cancellation.
2. I accept that Dorset Climbing Activities Ltd is not under any liability whatsoever in respect of loss or damage to personal property, not caused by the negligence or default of Dorset Climbing Activities Ltd.
3. Participation in rock climbing and mountaineering activities involves some risk of injury. Dorset Climbing Activities Ltd staff are trained and appropriately qualified for the course activities and will at all times carry out the activity in a manner to limit the risk of injury. However, participants accept that accidents and injury may occur.
4. I agree to follow the advice and accept the decisions made by Dorset Climbing Activities Ltd staff regarding all safety issues.

Signature _____

Date _____