

Assumption of liability for school groups & team training

Last name, first name:

Date of birth: Tel.-Nr.:

Address: (postcode/town/street):
.....
.....

E-Mail:

Name of the school / team:

Personal climbing education:

- With my personal signature, I confirm that I accept full responsibility and liability for the participants in my group during their entire stay at the climbing facility.
- I have read the house rules, the general terms & conditions and the safety instructions and will ensure that I and my group will comply with them.
- I am up-to-date and suitably trained in climbing for the supervision and training of my group in a climbing facility and I have the required authorisation or the required trade permit.

Place, date Signature