School Attendance Form

Full School Name:



Date of Booking:_____ Time of Booking:_____

| | Participant Full Name | Instructor initials for check off | Tick if Belay Only | Tick if Teacher |
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Please turn over for more participants

Important Notes for teachers;

I acknowledge that I, the supervising teacher, must remain with the group for the duration of the activity and that the supervising teacher is NOT permitted to climb. I acknowledge that it is the responsibility of the supervising teacher (on behalf of the school), to have gained the permission of parents of the students to participate in this activity. I understand that any Hire equipment not returned at the end of the session will be charged to the school at current replacement costs. I understand that Hardrock will take no responsibility for lost or stolen property. I understand that I need to have the contact details of all students and can provide them to DHHS if required. I understand that it is the supervising teacher's duty to inform Hardrock staff of any disabilities or special requirements of the students attending. I also understand that the student's behavior is the responsibility of the supervising teacher and that Hardrock Instructors have the right to refuse participation to any student.

| Teachers Name: | Signed: | Date: | | | |
|---|-------------------------|-------------------------|--|--|--|
| HARDROCK STAFF to COMPLETE: | | | | | |
| Number of student climbers: | Actual attendees update | d in Easyrock: Initial: | | | |
| Number of teacher climbers: (do not include teachers in actual attendees count) | | | | | |
| Email Address for Invoice: | | | | | |
| ADMIN DETAILS: Invoiced details en | tered: Initial: | Date: | | | |

| | Participant Full Name | Instructor initials for check off | Tick if Belay Only | Tick if Teacher |
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