



CLIMBING
SPOT
CLIMBING & BOULDERING GYM

Declaration form

First name and surname:.....

Address:.....

Number of ID card:.....

I confirm that I have read and understood the Conditions of Use of the climbing wall, Climbing Spot Climbing and Bouldering Gym, and I agree to abide by the Conditions of Use. I am aware that climbing is an activity with a danger of potential injury and I accept this risk. I certify that I have an adequate health insurance. If I am involved in an accident which could result in my injury I won't make any claims to SAE s. c.

Date:.....

Signature:.....

I've heard about this climbing wall from: