UIAA Global Youth Summit International climbing and trekking in Nepal Registration Form November 20th to 28th 2011

MOUNTAINEERING FEDERAT	ION / CLUB:		
ADDRESS:		CONTACT NUMBE	R:
WEBSITE:	E-MAIL:		
YOUR FULL NAME AS IN PAS	SPORT: Name	Last name:	
NATIONALITY:			
YOUR ADDRESS:			
DATE OF BIRTH:	SEX:		
PASSPORT NO: VALIDITY:	DATE & PLACE	DATE & PLACE OF ISSUE: PERIOD OF	
	_Your passport must ha	ave a minimum validity of 6 r	nonths for travel
to Nepal.			
E-MAIL:	MOBILI	E PHONE:	
PHONE:			
EMERGENCY CONTACT DET	AILS:		
CONTACT PERSON / RELATION	ON: CONTACT NO:		

Brief climbing & trekking background		
I can tie in Yes/No/		
I can top rope belay safely /Yes/No		
I can lead belay safely /Yes/No		
My current on sight level is: My current red point level is:		
Experience in mountaineering / qualifications:		

Do you suffer from any pre-existing medical conditions? Please specify details:

Are you under any medication that we should know? Please specify_____

Your Blood Group _____

Special diets:
vegetarian
Eat variety
allergies and intolerances
special diet

Spoken languages:

Participants must be protected by their own insurance that cover accidental, medical, emergency evacuation and loss or damage to personal effects.

INSURER: POLICY Number:_

Place: date: time of arrival and transport	, which you plan to use (and number of
flight):	

Questions: Date:

Signature

Participants applying for a UIAA Global Youth Summit event also acknowledge and accept that:

- Safety is a primary concern at UIAA Global Youth Summit Events, but as with all the other forms of climbing there is a danger of personal injury or death.

- Participants at UIAA Global Youth Summit events, and their parents if U18, accept the risks of participation and are responsible for their own actions, which should take account of relevant circumstances such as changing weather conditions.

- To take part it is necessary to be medically fit to do the activity and have valid liability and accident insurance which is valid in the country of the event and which covers rescue and repatriation.

- Please also complete the Release & Assumption of risk form

Signed:(Participant OR parent if under 18 years old) _____ Date:_____Date:_____

Print name:

Payment method: Bank transfer: yes/no PayPal: yes/no If these are difficult please contact Dawa Steven NMA for arranging to bring payment. Please send an email to Dawa Steven as soon as you know you can attend or if as a Federation and can send a climber.

Please send this registration form by email to <u>dawasteven@gmail.com</u> and office@theuiaa.org

before 10 NOVEMBER 2011.

<u>Contacts</u>

Additional information from organiser: dawasteven@gmail.com NMA

Payment contact Sophie Gerard at the UIAA Office <u>sophie.gerard@theuiaa.org</u> office@theuiaa.org Payment possible by Paypal and bank transfer

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