

# APEX TRAINING

**Specialist Skills Training Courses.**

## MLTE Single Pitch Award (SPA) Training / Assessment Course - Booking Form

[Please complete below in block capitals and/or circle options]

Name: ..... Male/Female Age: ..... Date of Birth: .....

Address: .....

..... Post Code: .....

Telephone (home): ..... (work): ..... (Mobile) .....

E-Mail: .....

Special dietary requirements (residential courses only): .....

[Additional details overleaf if necessary]

### **COURSE APPLIED FOR:**

Course Name: ..... Course Code: ..... Course dates: .....

Date of registration with MLTE: ..... Registration number: .....

[Or equivalent Home Nation Mountain Leader Training Board]

This application is for TRAINING / ASSESSMENT? ..... Relevant section of Log book enclosed [See below]? YES / NO

***[Please note: Candidates applying for either a training or an assessment course are required to submit a COPY of their SPA log book or a detailed précis of their climbing experience when returning this booking form.]***

Do you hold a valid First Aid Certificate? ..... YES / NO / PENDING.

### **HEALTH:**

Are you sure that you are physically fit to take part in the course for which you are applying? YES / NO

Please give details of any relevant disability or medical condition : .....

[Additional details overleaf if necessary]

Are you currently taking medication on the advise of a Doctor? YES / NO Details: .....

### **Participation Statement**

*One of the attractions of mountaineering climbing and mountain walking is its adventurous nature. The accident rate in mountaineering /climbing / hill walking is thankfully low but from time to time serious and fatal accidents do occur. It is therefore important that participants in these activities are aware of, and accept, the elements of risk and taking responsibility for their own actions.*

### **AGREEMENT**

- ✓ If this application is accepted I agree to abide by such safety requirements as Apex Training or its representatives may consider advisable.
- ✓ I have read the course description and course notes and understand that I can obtain further information if required.
- ✓ I have read and understood the Participation Statement. (See above)
- ✓ I understand that Apex Training are under no liability whatsoever in respect of personal loss or injury that I sustain, except as required by law.
- ✓ **If I wish personal accident insurance and course cancellation insurance shall arrange same.**
- ✓ I understand that if I withdraw from the course I will forfeit an administration cost (Currently £20.00).
- ✓ I also understand that if I withdraw within 14 days of the start of the course for whatever reason I am liable for the full fee.
- ✓ If the course is cancelled by Dales Ventures-Apex Training for whatever reason, I understand that I will be offered the option of alternative dates or a full refund.

Signature: ..... Date: .....

I enclose a cheque (made payable to "Apex Training") for £ .....In respect of the **FULL FEE**.

**Please return completed enrolment and booking forms to:-**

**THANK YOU**

**Apex Training, 3 Bens Row, Brow Edge, Backbarrow, Cumbria, LA12**