



2023 YOUTH ROCK CLIMBING CLASSES

Want to learn a new sport? Come try our climbing classes!

Rock Climbing classes teach participants techniques in climbing as well as how to safely participate in the sport. Our classes are designed to build on each other to teach kids how to climb. Join us for this fun sport and learn a new skill! All classes are 1.5 hours long and class descriptions can be found below.

Youth Beginner Class

Saturdays
9:00 AM &
Mon or Thr
Evenings

Learn to tie knots safely and correctly, understand the care of ropes and equipment, Engage in basic rock climbing technique and form, and learn to belay a climbing partner correctly.

Youth Intermediate Class

Saturdays
10:30 AM

Learn more advanced climbing techniques and skills, become more comfortable and confident on the wall

Climbing Club (Advanced Class)

Monday
5:30 PM

Enhance skill and technique to a proficient level.

Youth and Beginning & Intermediate Classes Run on an 8 week course. Climbing Club runs on a monthly (4 week) course.

Participant must have a liability waiver and rules form signed by a parent/guardian.

Participant must be at least 7 years old.

Equipment rental is included in fee

We reserve the right to cancel class if needed.

If a student misses a class, we do not provide credit, refunds or make-ups.




RECREATION FORM

Dimple Dell Fitness & Recreation Center - YOUTH ROCK CLIMBING CLASSES (2023)

Youth Rock Climbing Classes

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| <input type="checkbox"/> Youth Beginner Class | <input type="checkbox"/> January/February |
| <input type="checkbox"/> Saturday <input type="checkbox"/> Weeknight (M or Th) | <input type="checkbox"/> March/April |
| <input type="checkbox"/> Youth Intermediate Class | <input type="checkbox"/> May/June |
| <input type="checkbox"/> Climbing Club (Youth Adv) | <input type="checkbox"/> July/August |
| Month: _____ | <input type="checkbox"/> September/October |
| | <input type="checkbox"/> November/December |

Name of Participant _____
Birthday _____ Age _____ Girl Boy
Address _____ ZIP _____ City _____ State _____
Work # _____ Home # _____ Cell # _____ (please check preferred #)
Parent/Guardian _____ E-Mail (required) _____
Emergency Contact (other than guardian) _____ Phone _____

 Check here to be contacted about inclusion opportunities for people with disabilities.

Dimple Dell Fitness & Recreation Center
10670 S. 1000 E.
385-468-3355
slco.org/dimple-dell/

PARENTAL STATEMENT OF AGREEMENT - ASSUMPTION OF RISK, LIABILITY RELEASE AND REFUND POLICY

Assumption of Risk: I hereby acknowledge and agree that my child's participation in recreational activities involves inherent foreseeable and unforeseeable risks and hazards which may expose my child, or me, to illness, injury, or death. In consideration of my child's participation in such activities, I for myself, my child, my heirs, my executors and administrators, freely and voluntarily agree to assume and accept any and all risks to my child or myself associated with my child's participation in Salt Lake County recreational activities.

Release: In consideration of my child's participation in the Salt Lake County recreational activities, I, for myself, my child, my heirs, my executors and administrators hereby release Salt Lake County and its officers, agents, and employees from any cause of action, claim, or demand of any nature whatsoever I or my child may now have, or have in the future, against Salt Lake County on account of personal injury, property damage, death, or accident of any kind, caused by, arising out of, or in any way related to my child's participation in Salt Lake County recreational activities.

Indemnification: In consideration of my child's participation in the Salt Lake County recreational activities, I agree to indemnify and hold harmless County, its officers, agents, and employees from any and all causes of action, claims, demands, losses, or costs of any nature whatever cause by, arising out of, or in any way related to my child's participation in the Salt Lake County recreational activities. I agree that my duty to defend and indemnify the County under this Agreement includes all attorney fees, litigation and court costs, expert witness fees, and any sums expended by or assessed against the County for the defense of any claim or to satisfy any settlement, arbitration award, or verdict paid or incurred on behalf of the County arising out of or in any way related to my child's participation in the Salt Lake County recreational activities.

Refund: Refunds may only be requested in person and must be accompanied by a written request. As per Salt Lake County policy and procedures the Parks and Recreation Division may withhold 25% of the refund (program registration fee) for administrative costs. No refunds shall be given after the first day of the program.

Collections: I agree to pay Salt Lake County all costs incurred, together with reasonable attorney's fees in the event that my account is referred for collection. I understand that any account delinquent 30 days or more will be turned over to collection.

Emergency Treatment: I hereby authorize Salt Lake Parks and Recreation program staff to act on my behalf in accordance with their best judgment in case of an emergency involving my child, and agree to assume full responsibility for all expenses, medical or otherwise, that may arise therefrom.

Media Consent: I hereby grant permission to Salt Lake County to use my or my children's photograph, videotaped image, quotes/comments, or name for publicity and educational purposes in any and all publications and media without limit or compensation.

Name Posting: Unless otherwise indicated below, Salt Lake County is authorized to post or publish the name of my child participating in Salt Lake County recreational activities on the Salt Lake County website.

I do not authorize Salt Lake County to post or publish the name of my child participating in Salt Lake County recreational activities on the Salt Lake County website. _____

By signing this assumption of risk, liability release, and refund policy statement, I acknowledge that I have read its contents and disclosure, that I understand its contents and disclosure, and that I agree to its terms. If any portion of this Agreement is held to be invalid by a court of law, then it is agreed and intended that all the remainder shall, notwithstanding, continue in full force and effect.

Name of Child Participant: _____

Signature (Parent or Legal Guardian): _____ Date: _____

OFFICE USE ONLY: Till #	Amount	By	Date
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