

TOP ROPE VERIFICATION

PARTICIPANT DECLARATION		
Full Name:	Identification / Passport Number:	
	Date of Birth:	
(1) I declare that (please tick either option and complete details):		
<input type="checkbox"/> I have attended a top rope climbing & belaying course Course Name: _____ Instructor Name: _____ Country /Location: _____ Date attained: _____	OR	<input type="checkbox"/> I have at least 1 year of top rope climbing and belaying experience Year(s) of experience: _____ Where I climb: _____
(2) I declare that (please tick either option and complete details):		
<input type="checkbox"/> I am taking this verification for the first time	OR	<input type="checkbox"/> I have taken this verification before Date of last test: _____ Course /Training attended since last test: _____
(3) I am aware that (please tick):		
<input type="checkbox"/> This verification is not a replacement for attending a course /formal training and I am expected to be proficient in the required skills before taking the test.		
<input type="checkbox"/> If I fail this test or have my tag revoked, I will not be allowed to retake this test until at least 1 month from the date of failure /revocation, or earlier if I show proof of attending a course /training.		
<input type="checkbox"/> There are limitations to assisted braking devices and any other equipment. For any equipment I choose to use, it is my responsibility to ensure that I am familiar with its use and manufacturer's instructions.		
<input type="checkbox"/> If I pass this test, I will receive a tag to be displayed when climbing & belaying. Tag is non-transferable and a \$5 admin fee is payable for tag replacement.		
<input type="checkbox"/> There are inherent risks in climbing & belaying and I will continue to be responsible for my own safety and to know & follow the protocols as displayed in each participating climbing facility. I am aware that my tag and/or other privileges may be revoked if I fail to do so.		
_____ Participant's Signature & Date		

TOP ROPE VERIFICATION
(For Testers Use Only)

PASSING REQUIREMENTS			
General	YES	NO	Remarks
Appropriate use of harness*			
Pre-climb buddy checks*			
Proper use of verbal belay commands			
Climber	YES	NO	Remarks
Tying of retraced figure 8 knot with sufficient amount of tail*			
Climber is aware of surroundings and climbs on route			
Climber is appropriately positioned when being lowered			
Belayer	YES	NO	Remarks
Proficient belay technique including:			Device Used:
▪ Proper configuration /set up of belay device*			
▪ Takes in rope smoothly			
▪ Maintains brake hand on the rope at all times*			
▪ Ability to brake at all times*			
▪ Able to reflexively react to catch a fall*			
▪ Controlled lowering of climber*			
▪ Proper positioning while belaying			

Passing Criteria: Immediate failure if participant fails to meet the requirements marked with *. Participant will also fail if he / she has TWO or more "No"s

RESULT	
PASS / FAIL	
Verified By (Name & Signature):	Date and Time of Verification:
	Verification Venue:

FOLLOW-UP ACTION	
Issued Tag Number /Staff Name /Date:	Acknowledgement of Tag Received: