All visitors (climbers and spectators accompanying climbers) must complete a release of liability waiver or have a waiver already on file at Escala 25.

REGISTRATION FORM:

First Name: Selin

Last Name: Koçak

Telephone: +351912325245

National ID / Passport number / NIF: 317729454

Email: selinsohto@gmail.com

City: Lisbon, Portugal

Postal Code: 1250119

Emergency Contact: Can Koçak

Emergency Telephone: +351912556298

Note: AGE RESTRICTIONS: No minimum age to belay on top rope, as long as the harness fits. No minimum age to boulder, as long as parent or staff supervises the younger ones. Lead belay: at parent's discretion and as long as the harness fits.

WAIVER AND RELEASE OF LIABILITY:

I, on behalf of myself and/or as a parent, guardian or guardian of the minor child described herein, certify that I have read and understood the rules of Escala25 and understand and agree that i may be required to undergo aptitude tests to use certain climbing gym equipment administered by Escala25 employees.

I hereby undertake to comply with all safety standards in the handling of collective equipment and PPE (harness, helmet, carabiners, etc.). In the case of using my own PPE, I am responsible for any situation and/or accident resulting from the poor condition/misuse of it.

I recognise that photos or video footage of myself and/or my child/s may be captured while on site. At which time, I have the right to review and/or refuse the use of these images on social media channels and/or in other promotional materials.

Finally, I acknowledge and understand that Escala25 reserves the right to refuse entry or participation in its activities to any person for any reason and at any time.

In connection with my use (or my child's) of the climbing wall, the undersigned, you agree to exempt and release Escala25, its employees, contractors and agents from any and all causes of action, claims, demands, losses or costs of any nature that is arising out of or in any way related to my use of the Climbing Wall if it is not complying with the safety rules and its proper functioning.

01/11/2026
Selin Koçak

I agree to receive news, promotional and marketing messages related to the products and services offered by Escala 25 Center: X

Signature: _____

