

## CLIMBING WALL SUPPLEMENTAL QUESTIONNAIRE

(Separate application required for each location)

### I. GENERAL INFORMATION

NAMED INSURED: \_\_\_\_\_ DBA: \_\_\_\_\_

FACILITY ADDRESS: \_\_\_\_\_

WEBSITE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

1. How many Climbing Walls: Indoor: \_\_\_\_\_ Outdoor: \_\_\_\_\_
2. Height of wall(s)? \_\_\_\_\_
3. What is the maximum height of wall(s)? \_\_\_\_\_
4. Are the wall(s): ☐ Movable ☐ Stationary

### II. OPERATION AND TRAINING

1. Are the following always present when the wall is being used?
  - a. A staff member who understands the safety rules and is certified to belay on the walls? ☐ Yes ☐ No
  - b. A Certified Instructor with First Aid and CPR Training? ☐ Yes ☐ No
  - c. A full-time staff member positioned to have a clear and unobstructed view of the climbing wall and participants? ☐ Yes ☐ No
  - d. A first aid kit? ☐ Yes ☐ No
2. Is there a documented training program in place which includes:
  - a. Rules for the Climbing Wall? ☐ Yes ☐ No
  - b. Harness and rope inspection? ☐ Yes ☐ No
  - c. Proper belay techniques? ☐ Yes ☐ No
  - d. Belay device failure or entrapment? ☐ Yes ☐ No
  - e. Set-up and takedown procedures? ☐ Yes ☐ No
  - f. Emergency takedown procedures? ☐ Yes ☐ No
  - g. Procedures for reporting problems? ☐ Yes ☐ No
3. What is the ratio of supervisory staff to users? \_\_\_\_\_
4. Who is responsible for developing routes and what guidelines are used? \_\_\_\_\_
5. Does your facility require a waiver to be signed specific for the climbing wall operations? ☐ Yes ☐ No
6. What is the age range for participants? \_\_\_\_\_
7. What are the guidelines for club users with personal gear? \_\_\_\_\_

### III. SAFETY

1. How is the climbing area access controlled? \_\_\_\_\_
2. What is the check-in procedure? \_\_\_\_\_
3. Do you require the use of a belaying system? ☐ Yes ☐ No
4. Has the belay system been certified to exceed maximum possible stresses that all climbers can produce from simultaneous falls? ☐ Yes ☐ No
5. Are the belay systems anchors "backed-up"? ☐ Yes ☐ No
6. Are belayers approved prior to their use of the wall? ☐ Yes ☐ No
7. Are belayers anchored to a secure point? ☐ Yes ☐ No
8. Is there a minimum age for belayers? ☐ Yes ☐ No
9. What type of safety equipment is required? \_\_\_\_\_  
\_\_\_\_\_
10. What type of absorbent floor covering is used immediately adjacent to wall(s)? Describe makeup, thickness, and extent of fall protection:  
\_\_\_\_\_  
\_\_\_\_\_
11. Is a comprehensive set of safety guidelines and policies for the climbing wall posted in a conspicuous place? ☐ Yes ☐ No
12. Is free climbing allowed? ☐ Yes ☐ No
13. Describe your emergency response plan in case of an accident, including distance of your facility from ambulance and hospital:  
\_\_\_\_\_  
\_\_\_\_\_

### IV. MAINTENANCE

1. Did a professional construct the Climbing Wall(s)? ☐ Yes ☐ No
2. Did the wall manufacturer provide a Certificate of Insurance covering completed operations liability? ☐ Yes ☐ No
3. Has the Climbing Wall(s) been inspected and determined to meet local and state building codes? ☐ Yes ☐ No
4. Were written maintenance procedures provided by designer/builder? ☐ Yes ☐ No
5. Does climbing wall area have written maintenance procedures including checklists and logs? ☐ Yes ☐ No
6. Who performs maintenance? ☐ Employees ☐ Outside professional resource.
  - If outside professional source,  
Do you require a Certificate of Insurance with Additional Insured status? ☐ Yes ☐ No
7. How often is all equipment in the climbing wall area inspected? \_\_\_\_\_
8. Is a rope long maintained and used for daily operations? ☐ Yes ☐ No
9. How often are all hold checked to ensure that they were securely connected? \_\_\_\_\_
10. How often are all holds cleaned? \_\_\_\_\_

## V. PROGRAMS

1. Is there a program in place to identify equipment (ropes, harnesses, carabineers, etc.) that should be retired? ☐ Yes ☐ No
2. Are there regularly scheduled program activities for the climbing wall area? ☐ Yes ☐ No
  - If yes, provide program listing.
3. Is the climbing area available for party rental? ☐ Yes ☐ No
4. Is the climbing area available for competitions? ☐ Yes ☐ No

## VI. SUMMARY OF REQUESTED ITEMS

Attach copy of the following:

- A. Waiver/Release that is signed by all climbers noting that parents must sign for minors
- B. House Operating Procedures
- C. Belay or Qualification Procedures
- D. Equipment Inspection Log
- E. Climbing Wall Employee Training Procedures

**Note:** Items B through E can be gathered during loss control survey. Only waiver needs to be reviewed during underwriting process.

Insured Signature: \_\_\_\_\_

Date: \_\_\_\_\_