



WASHINGTON ALPINE CLUB BASIC CLIMBING CLASS

2012 Application

- ◆ Need help? Contact the Class Chairs (cochairs@wacclass.org) or by phone, Erik Poley (206-420-4988), Gerhard Schneider (206-354-7837), Ira Rushwald (206-725-2725), or Amanda Stoneham (206-915-0114)
- ◆ Applications accepted now through January 31th, 2012.

Application for WAC Basic Climbing Class

Mail to:

WAC Basic Climbing Class
c/o Ira Rushwald
2527 32nd Ave South
Seattle, WA 98144

1. Basic Class 2012 Application Form
2. Basic Class Liability Waiver
3. WAC Membership Form
4. WAC Liability Waiver
5. \$350 check to "Washington Alpine Club" for class fee.
6. **SEPARATE** \$45 check to "Washington Alpine Club" for club membership.
(Write applicant's *name* on checks)

Download and print each form then mail as above:

- ◆ WAC Basic Class Application 2012 (attached)
- ◆ WAC Basic Class Liability Waiver (Go to: [WAC Basic Class Liability Waiver](#), print, fill out, and mail as above)
- ◆ WAC Membership Application (Go to: [WAC Membership Application](#) and fill out the online form, hit *submit**, then print the application form and waiver, and mail in as above)
- ◆ WAC Club Waiver (see Membership Application instructions)

*After you hit submit, a page will come up with your application information and the membership waiver (Note: this is different from the class waiver).

- ◆ **Applications must be postmarked by January 31, 2012.**
- ◆ Incomplete applications will not be accepted (this includes the waiver and checks).
- ◆ All students must be or become members of the WAC. Inactive WAC members need to renew.
- ◆ All applicants will be interviewed by phone and notified by **email** February 15, 2012.
- ◆ There are **no** refunds if you drop out of the class after March 28, 2012. **No exceptions.**
- ◆ If there are vacancies before class begins, we will fill them from the waitlist.
- ◆ **ATTENDANCE TO ALL CLASSROOM SESSIONS AND WEEKEND OUTINGS IS MANDATORY.**

CLIMBING IS DANGEROUS. TO BE CONSIDERED FOR THE CLASS, YOU ARE REQUIRED TO FILL OUT THE LIABILITY WAIVERS. YOU MUST ALSO HAVE HEALTH INSURANCE THROUGHOUT THE CLASS TO COVER ANY INJURIES.



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Personal Data

NAME _____ AGE ____ SEX: M / F

ADDRESS _____

CITY _____ ZIP _____

PHONE: Home () _____ Cell () _____ Work () _____

Best time to reach you: _____ Preferred phone #: home / cell / work

Remember, we will be calling you for a phone interview of ~20 minutes – it's important that we be able to reach you!

E-MAIL ADDRESS _____

WAC Member? ____ (# of years or 'new') *IF NEW, YOU MUST ENCLOSE A MEMBERSHIP APPLICATION*

Person to be Notified In Case of an Emergency

NAME _____ RELATIONSHIP _____

ADDRESS _____

CITY _____ ZIP _____

PHONE: Home () _____ Cell () _____ Work () _____

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### Please Answer the Following Questions

How did you hear about the class and/or the WAC?

Have you applied for the class before? If so, when?

Do you understand that this is a very time-committing class, and attendance is required at **ALL** classroom sessions and weekend outings?

This is a physically demanding class. How long does it take you to hike Mt. Si (4 mi., 3600 ft elevation gain, good trail – doesn't include the Haystack) with a 30-35lb. backpack? If you don't know how long it will take you then go do it.

Describe your weekly physical conditioning. How are you tailoring your exercise to train for this course?



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How many minutes of aerobic activity did you do this week?

What form of strength training did you do this week?

Please identify any former or current injuries (e.g. bad shoulder, back, knees) or medical conditions (e.g. allergies, asthma) that may be a concern and/or a safety risk in a remote location. Are there any medications you have to take regularly? **Accurate** information about your physical injuries or condition is **essential** in evaluating your capabilities and ensuring appropriate personal instruction.

Describe previous, if any, outdoor activity and climbing experience (**Note: you do not need climbing experience to take the class**):

|                                                                                                | Type of Activity | Dates/how long? | Comments |
|------------------------------------------------------------------------------------------------|------------------|-----------------|----------|
| <b>General outdoor experience</b> (hiking, backcountry/inbound skiing, kayaking, biking, etc.) |                  |                 |          |
| <b>Multi-day/Overnight</b> (backpacking trips, climbing trips, etc.)                           |                  |                 |          |
| <b>Technical skills</b> (alpine, rock climbing, gym climbing, snow/glacier travel, etc.)       |                  |                 |          |
| <b>Other</b> (anything else you'd like to share?)                                              |                  |                 |          |



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*2012 Application*

What do you wish to get out of the class? What would you do with the skills gained from the class?

Describe any difficult challenge you've overcome or experienced in the last year.

Please add any comments you think are relevant for your application on a separate page.

List any current WAC members that we can talk to as references.

Are you applying for the class with another person? If so, are you a "package deal," or would you still be willing to take the class if only one of you is accepted?

**Legal Stuff (3 places to initial, 1 place to sign):**

- ◆ I understand that climbing and mountaineering are inherently dangerous sports where serious, even fatal accidents and injuries can occur. Initial here: \_\_\_\_\_
- ◆ I have, and will continue to have throughout the class, medical insurance that will cover climbing/mountaineering injuries. I have disclosed all known previous injuries and medical conditions. I understand that the WAC is not liable and cannot cover such injuries and that I am required to complete a liability waiver before taking the class.  
Initial here: \_\_\_\_\_
- ◆ I understand that I am responsible for my class participation and for learning the material and that I can be dropped from the class for failing my responsibility, including physical conditioning. Initial here: \_\_\_\_\_

I acknowledge that above statements are true to the best of my knowledge.

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