

# Benchmark

## MANAGEMENT GROUP, INC.

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### Climbing Wall Questionnaire

**APPLICANT'S NAME** \_\_\_\_\_

**WALL INFORMATION**

1. Height of wall: \_\_\_\_\_ feet Width of wall: \_\_\_\_\_ feet Year constructed: \_\_\_\_\_
2. Was the climbing wall constructed by a contractor who provided you with a certificate of insurance which included completed operations coverage?  Yes  No
3. Was the wall constructed following Climbing Wall Industry Group (CWIG) or American Society of Testing and Materials (ASTM) design standards?  Yes  No
4. Is there a minimum of 6 to 12 inches of fall protection beneath the climbing wall out to a distance of 6 to 8 feet?  Yes  No
5. What type of material is used in the landing area? \_\_\_\_\_
6. Is there a line painted on the wall indicating the maximum height of the free climb zone?  Yes  No  
 If yes, height of line: \_\_\_\_\_ feet
7. Is a daily inspection of the wall performed and results documented?  Yes  No
8. Is wall maintenance conducted by an independent contractor who provides you with a certificate of insurance?  Yes  No

**EQUIPMENT INFORMATION**

9. Does all the climbing safety equipment conform to the American Society of testing and Materials (ASTM) and/or the International Association of Alpine Associations (UIAA) standards?  Yes  No
10. Is all climbing safety equipment inspected daily with inspection results documented?  Yes  No

**SAFETY AND TRAINING RULES**

11. Are safety rules posted?  Yes  No
12. Is there a documented training program for all wall users which includes:

	Yes	No		Yes	No
Harness and rope inspection procedure?			Rules for climbing wall?		
Proper belaying techniques?			Setup and takedown procedures?		
Emergency takedowns?			Procedures for reporting problems?		
Belay device failure or entrapment?					

13. Is there a method to identify approved users prior to their use of the wall?  Yes  No

**STAFF INFORMATION**

14. Is a full-time, first-aid or CPR certified staff member always present?    Yes     No

15. Is this full-time staff member certified to belay on the wall and understand the safety rules?    Yes     No

16. Is a full-time staff member positioned to have a clear view of the climbing wall and participants?    Yes     No

**MEMBERS**

17. Do membership agreements contain a hold harmless clause (Liability Waiver) and require signature indicating acceptance?    Yes     No

APPLICANT'S SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_