



**ROCK VENTURES**  
 www.rockventures.net  
 (585) 442 5462  
 fax: (585) 219 5700  
 rock@rockventures.net

**SHARED ADVENTURES**  
 www.sharedadventures.net  
 (585) 244 9377  
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 create@sharedadventures.net



GROUP NAME: \_\_\_\_\_

# GROUP CONTRACT

GROUP CONTACT NAME: \_\_\_\_\_ Email Address: \_\_\_\_\_

Date: \_\_\_\_\_ Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Fax ( \_\_\_\_\_ ) \_\_\_\_\_

The Group will attend this \_\_\_\_\_ Event on: Date \_\_\_\_\_ Day \_\_\_\_\_ Time \_\_\_\_\_ to \_\_\_\_\_

Guaranteed # attending \_\_\_\_\_ for \_\_\_\_\_ at \$ \_\_\_\_\_ per person = \_\_\_\_\_

# attending \_\_\_\_\_ for \_\_\_\_\_ at \$ \_\_\_\_\_ per person = \_\_\_\_\_

Guaranteed Minimum Payment for \_\_\_\_\_ people is \$ \_\_\_\_\_ (please notify Rock Ventures if numbers increase)

Deposit paid? Y N Date: \_\_\_\_\_ Amount \$ \_\_\_\_\_ 50% Deposit due: \_\_\_\_\_ Amount \$ \_\_\_\_\_

The price for any participant, over the guaranteed minimum number, is: \$ \_\_\_\_\_ per person

- |   |                              |            |
|---|------------------------------|------------|
| 1. Additional T-shirts -----                                | # _____ X (\$8.64 each)      | = \$ _____ |
| 2. Additional Carabiner Key Chains -----                    | # _____ X (\$2.70 each)      | = \$ _____ |
| 3. Additional XL Pizza, 10 slices -----                     | # _____ X (\$16.00 each)     | = \$ _____ |
| 4. Additional Soft Drinks/Drink Mix-----                    | # _____ X (\$1.50-2.50 each) | = \$ _____ |
| 5. Additional hour(s)time -----                             | # _____ X (\$ _____ each)    | = \$ _____ |
| 6. Additional Ropes Elements - Cargo Net, Vertical Play Pen | (\$ _____ each)              | = \$ _____ |
| 7. Additional Rappelling -----                              | # _____ X (\$ _____ each)    | = \$ _____ |
| 8. Additional Ropes Course Circuit -----                    | # _____ X ( _____ )          | = \$ _____ |
| 9. Additional Floor Problems and debrief -                  | # _____ X ( _____ )          | = \$ _____ |
| 10. Additional TEAM GOALS, CHALLENGES, ACCOUNTABILITY       |                              | = \$ _____ |
| 11. Additional DISC personality profiles --                 | # _____ X ( _____ )          | = \$ _____ |
| 12. Other additional options -----                          | #( _____ )                   | = \$ _____ |
| 13. NOTES:  |                              |            |

**BALANCE DUE DATE:** \_\_\_\_\_ **TOTAL AMOUNT DUE = \$** \_\_\_\_\_

**ROCK VENTURES' POLICIES:** Rock Ventures requires all participants to fully and neatly complete a liability waiver, found at [www.rockventures.net](http://www.rockventures.net). All participants under the age of 18 must have a parent or legal guardian sign for them. Failure to do so will preclude participation. **Misrepresentation or falsification of waiver signatures and/or information may be a criminal offence and will be prosecuted. Adult leaders are personally accountable for checking and confirming this for each of their group participants.** There are **NO EXCEPTIONS** regarding the waiver requirements. All payments are non-refundable and non-transferable. Outside food and drink, loose chalk, and open toed shoes are not permitted. Events start and end on time, failure to do so may affect the general success or cancellation of an event; please arrive early to complete any remaining waivers and to get your equipment on. Loose clothing is the best thing to wear. For groups of participants under 18 years old, you agree to bring 2 or more willing and able adults to chaperone the event, who are not climbing or belaying; there will be no charge for these required chaperones. An event is not completely booked until BOTH the deposit and this, signed contract, are returned to Rock Ventures, either by mail, email, or fax. Upon request, a copy of this contract will be returned to your group. If you have questions, please call Rock Ventures at 585 442 5462 or mail: 1044 University Avenue, Rochester, NY 14607.

**I agree to the above terms and attached form and will communicate this to all group members.**

Group Representative Signature \_\_\_\_\_ Group Representative Printed Name \_\_\_\_\_

# ROCKVENTURES GROUP CONTRACT

ALL must be initialed ↓↓↓

## THESE POLICIES AND PROCEDURES ARE MANDATORY FOR ALL GROUPS; PLEASE SIGN AND RETURN TODAY.

I agree to communicate the policies, rules, and expectations on this form to my group. RockVentures' insurance company requires that the group contact person is over 21 years of age and will attend the event. Each member of my group will read, legibly, and fully complete our waiver. RockVentures waivers can be downloaded at [www.rockventures.net](http://www.rockventures.net) under FORMS. If under 18, each of my participants will have his or her parent or legal guardian sign our waiver. **I GUARANTEE this will be done:** INITIAL: \_\_\_\_\_

Anyone, under 18 years of age, who arrive without **their parent or legal guardian's signature** on our waiver, will NOT be able to participate. I understand that misrepresentation or falsification of waiver signatures and/or information may be a criminal offense and will be prosecuted. INITIAL: \_\_\_\_\_

I promise ALL WAIVERS will be NEAT, LEGIBLE, and COMPLETELY FILLED OUT. If people are too young to read waivers; they must be read to them by their parent or the group leader. Waivers take a minimum of 3-10 minutes to read and complete; insufficient time spent completing the waiver is not acceptable and not permitted by our insurance company. INITIAL: \_\_\_\_\_

**FOR ALL GROUPS RECEIVING TRAINING:** Reserved training times require participants to arrive at least 15 minutes prior to the start-time...to complete waiver, related paperwork and to get equipment on. People who arrive at the training time AND not 15 minutes earlier, ARE LATE...we cannot add people to classes after they have begun. I agree to inform all participants of RockVentures' location. If any or all my participants do not show up, or come late, for any reason, **there will be no refunds or transfers**. I understand unhappy or disappointed people will be referred to ME. I understand, changes in Group Contact Person means the event may not be successful. **I GUARANTEE everyone knows this:** INITIAL: \_\_\_\_\_

Helmets are very important to help prevent head or neck injury; each climber will be offered one and it is YOUR responsibility to police helmet users if a parent or organization requires a participant wear one. ALL Scout, YMCA, Youth, School, Birthday, Company or other organizations must have participants wear a helmet; no exceptions! INITIAL: \_\_\_\_\_

We require most groups have back-up belayers (one or more people attentively assisting the primary rope holder). I will support this requirement and be supportive of our lifeguards. RockVentures staff are lifeguards and instructors and NOT police. You have agreed to make sure your participants do NOT run, are paying attention to climbers when belaying, are following the procedures we require and will outline in the Safety or Belay Course. If my group is "horse playing", not attentive, ignoring our rules...I will be held accountable & be brought into the discussion with offender. INITIAL: \_\_\_\_\_

We mandate a controlled belay system, 4 safety checks and climbing commands prior to climbing EVERY time. If my climbers and belayers need to be reminded more than twice (possibly sooner) about this requirement or other behaviors, they will be asked to leave and **will not be given refunds**. We want you and your group to have a terrific, safe time. Climbing is not safe when our rules are not followed. When leaders are NOT supportive of our policies and procedures...the event is NOT successful. Thanks for helping us provide a safe, fun experience for your group. Our policies and procedures are industry wide; thanks for your understanding and cooperation. INITIAL: \_\_\_\_\_

**There are NO RESERVATIONS accepted until BOTH the contract (two sided), and payment are received.**

We accept contracts by email, fax, or US mail.

**INCOMPLETE CONTRACTS are NOT ACCEPTED. THANKS FOR YOUR COOPERATION!**

TRAINING ARRIVAL TIME: \_\_\_\_\_ TRAINING START TIME: \_\_\_\_\_ DATE: \_\_\_\_\_

GROUP ARRIVAL TIME: \_\_\_\_\_ GROUP START TIME: \_\_\_\_\_ DATE: \_\_\_\_\_

Print Name: \_\_\_\_\_ Sign Name: \_\_\_\_\_ Date: \_\_\_\_\_

RockVentures Staff: \_\_\_\_\_ Date \_\_\_\_\_