



Delta Explosion Gymnastics Birthday Party Agreement

FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Participant Information:

Name: _____ Date of Birth: _____ Gender: M or F

Parent/Guardian Information:

Name: _____ Date of Birth: _____

Address: _____ City: _____ State: _____

Zip Code: _____ Phone Number: _____

Email Address: _____

PLEASE NOTE: A PARENT OR ADULT GUARDIAN MUST REMAIN ON SITE FOR THE DURATION OF THE PARTY. ADULTS ARE NOT PERMITTED ON EQUIPMENT.

1st hour of party is hosted in the gym and last 30 min is set aside for food and presents.
Once participants leave the gym area to eat they will NOT be allowed to return to the gym.
Doors open for set up 20 min before start of party.

Party Date: ____/____/____

Party Time(check one):**Saturday** ____ 10:30am-12:00pm or ____ 1:00pm-2:30pm
Sunday ____ 1:00-2:30 (only)

Party Package: Check One (we will automatically upgrade you if you go over the amount of allotted guests. "Guests" refers to children participating in party activities)

_____ *Silver Member \$115* _____ *Silver Non-Member \$140 (up to 15 guests)*

_____ *Gold Member \$125* _____ *Gold Non-Member \$150 (up to 25 guests)*

_____ *Request to add extra 30 min to package +\$25 (1:00-3:00pm only)*
Extra 30 must be approved by Gymnastics Director no later than 5:00pm on Thursday before the party date or it is not guaranteed.

LIABILITY AND CONDITIONS OF PARTICIPATION:

In consideration of gaining membership or being allowed to participate in the activities and programs of the YMCA, use of the facilities, equipment, and machinery, I do hereby waive, release, and forever discharge the YMCA and it's officers, agents, employees, representatives, executors, and all others from any and all responsibilities or liability for injuries or damage resulting from my participation in any activities at said facility. I do hereby release all of these mentioned and any others acting on their behalf from any responsibility or liability for any injury or damage to myself or family, including those caused by the negligent act or omission of any of those mentioned or others acting on their behalf or in any way arising out of or connected with my participation in any activities of the YMCA or use of any equipment at the YMCA.

I agree on behalf of my household, my family, and myself with the YMCA policies and procedures and understand that my/our membership can be revoked without refund for exhibiting inappropriate behavior or abuse toward the YMCA staff or facilities. I have read and understand the above policies, procedures, and party guidelines. Policies, procedures, and schedules are subject to change.

PHOTO RELEASE: I hereby grant permission for the YMCA to use without limitation or obligation, photographs or other media to promote or interpret YMCA programs.

Signature of Applicant or Parent/Guardian

Date