

Roots Gymnastics Center Birthday Party Agreement Form

Date of Party _____ Time of Party _____
 Parents Name _____ Phone #: _____
 Name of Birthday Child: _____ M/F _____
 Childs Date of Birth: _____

Number of Participants attending Party: _____ Age Range: _____

Are there any medical conditions we should be alerted? If yes, please explain.

Gentle Reminders:

1. All party participants must have a signed liability waiver before participating in any activities.
2. Roots Gymnastics Center shall not be responsible for damage to property sustained by the undersigned or their guests.
3. For safety reasons, party participants will not be allowed in the gym before or after the scheduled party.
4. All parties include one instructor. If there are more than 12 children you will receive a second instructor at no extra charge, however it is your responsibility to call at least 5 days in advance to arrange a second instructor. You may also request a second instructor (at least 5 days in advance) at a rate of 25.00 per additional instructor.
5. Base price for a birthday party is \$150.00 for up to 12 children. Each additional child is \$8.00 per child.
6. A \$50.00 deposit is due upon booking your party. Deposits are refundable if party is canceled due to inclement weather, or illness of the birthday child.
7. Birthday parties include one hour in the gym, with one instructor (up to 12 children) and 30 min in birthday party room.
8. We ask that parents supervise the children when they are upstairs in the birthday party room.

SIGNATURE OF PARTY HOST/PARENT **DATE**

OFFICE USE ONLY

Deposit _____ Date Paid _____

Party Fee (minus deposit) _____ Date Paid _____

Additional guests ____ x \$8.00 ea = _____

Additional Instructor(\$25.00 each): _____

TOTAL: _____

_____ Bounce House or Parachute

_____ Invitations

_____ Waivers

_____ Added to Additional Hours Sheet

_____ Confirmed