

# Magnitude 10.0 Gymnastics ~ BIRTHDAY PARTY AGREEMENT

DATE OF PARTY: \_\_\_\_\_ TIME OF PARTY: \_\_\_\_\_ SET-UP TIME: \_\_\_\_\_

NAME OF CHILD: \_\_\_\_\_ AGE: \_\_\_\_\_ NUMBER OF ATTENDEES: \_\_\_\_\_

PARENT(S)/GUARDIAN(S): \_\_\_\_\_

PHONE NUMBER(S): \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

NOTES/SPECIAL REQUEST(S): \_\_\_\_\_

Will you be serving pizza? (Please check): YES  NO  (If yes, time in the gym will be 45 min instead of 1 hr)

Will you be unwrapping gifts on-site (Please check): YES  NO

**Magnitude 10.0 Gymnastics, LLC, will provide party assistants (based on number of party participants) and the use of its facility for a period not to exceed two (2) hours of time (15 minutes of set-up time & either 45 or 60 minutes of activities in the gym – (based on pizza) and 45 minutes of time in the lobby for refreshments & gifts (if applicable).**

\_\_\_\_\_ (please initial) Guardian or parent will provide all party supplies (i.e. cake, ice cream, decorations, etc.), and agrees to abide by all rules & regulations of Magnitude 10.0 Gymnastics, LLC.

\_\_\_\_\_ (please initial) Guardian or parent agrees that signature on this document constitutes a non-refundable & binding agreement between Magnitude 10.0 Gymnastics and guardian/parent.

\_\_\_\_\_ (please initial) The parent/guardian agrees to absolve Magnitude 10.0 Gymnastics, LLC, its employees and representatives from the costs and damages arising from injuries and/or liabilities suffered on premises.

\_\_\_\_\_ (please initial) Only children (**OVER THE AGE OF 4** & under the age of 13) are allowed in the gym area of the building and on the gymnastics equipment. **Parties are for children ages 4-13 only – NO EXCEPTIONS.**

\_\_\_\_\_ (please initial) **NO parents and/or adults are allowed in the gym area of the building at any time per our insurance.** If you would like photos taken while the children are in the gym, please give your camera to the person at the front desk. **We do not allow videotaping on the premises.**

\_\_\_\_\_ (please initial) **All participants must abide by all rules and any participant(s) not abiding by facility rules will be removed from the gym area & party activities-NO EXCEPTIONS.**

Signed: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date signed: \_\_\_\_\_

**NON-REFUNDABLE DEPOSIT:** AMOUNT: \_\_\_\_\_ DATE PAID: \_\_\_\_\_ BALANCE DUE: \_\_\_\_\_

Payment: CASH CHECK# \_\_\_\_\_ CCARD Balance Due Amount Paid & Date: \_\_\_\_\_