

## BIRTHDAY PARY RESERVATION REQUEST FORM

PARTY TYPE (choose one):	POOL	MIBIT	NINJA
	BOUNCE HOUSE	GYMNASTICS	
TIME (choose one):	Friday: 4:30p-6:30p **pool pool 5	arty only	
DATE YOU WOULD LIKE TO	HAVE THE PARTY:		
NAME OF RESPONSIBLE AD *This person is required to	ULT:stay for the duration of the pa	nrty	
NAME OF GUEST OF HONOR	R:		
CHILD'S BIRTHDAY:	_/		
PHONE NUMBER:			
EMAIL:			<del></del>
NUMBER OF GUESTS:*Birthday party rates are ba	 ased on 15 party participants,	including the birthday	child.
Please initial below if applic	able to the party you selected		
	n ages 7 and under must have I to swim without an adult in t		
	en under the age of 8 <i>and</i> thos with them at all times. Particip	•	
All Parties: All par guardian.	ticipants will be required to ha	ve a waiver signed by	a parent or



## **TERMS OF AGREEMENT**

- -The responsible adult listed on the reservation must remain onsite for the duration of the birthday party. They will also be expected to help maintain order.
- -Food and beverages must remain in the designated party area at all times.
- -Participants are limited to the use of designated party areas. The responsible adult will be responsible for ensuring participants are not traveling to other areas of the YMCA during the party.
- -Any deposit placed on the party is non-transferable and non-refundable.
- -No smoking, tobacco products, alcoholic beverages, or illegal substances are allowed on the premises. Anyone under the apparent influence of alcohol or illegal substances may not remain on YMCA premises.
- -All party participants must follow the rules of the YMCA and staff.
- -The YMA staff reserves the right to cancel or dismiss any reservation. A full refund will be issued if the YMCA cancels the reservation, however, in the event that a reservation is dismissed for violations of the rules and regulations of the YMCA, no refund will be issued.
- -I understand that my party must end on time to allow for the next scheduled party. Participants must have a waiver signed by a parent or guardian.
- -I have read through the Birthday Party FAO's and understand all the policies.

By my signature below, I certify that I have read the above agreement and my party's description and that I fully understand and freely agree to these conditions.

PRINTED NAME: _	
Signature:	
Date:	