CHAMPIONS GYMNASTICS

Telephone (705) 743-9338 2410 Lansdowne Street West Cavan Monaghan K9J 0G5

Birthday Party Agreement Form

Date: _____

Time: _____ Extra kids

Time in Gym: _____ - _____ _____ x 5 = _____

Time in Room: _____ - _____ _____ HST

Birthday Childs Name: _____ _____ ttl

Age: _____

Number of kids attending: _____

Parents Name: _____

Parents Email: _____

Contact #: _____

Break Down of Charges: 125 Gym + 75 Party Room + 26.00 HST = $226.00
Deposit Charges: 85 + 11.05 HST = $96.05 Non refundable

Deposit Paid: Y / N Amount: _____ Date: _____ Receipt # _____

Remaining Balance: _____ Due by: _____

Paid in Full: Y / N Amount: _____ Date: _____ Receipt # _____

1. Yes, I am aware the party cost is for up to 12 kids. If there are more than 12 kids there is a fee of $5.00 plus HST per child, that is to be paid before they enter the gym. (15 Kids Max)
2. Yes, I am aware that a guardian must have a waiver signed for each child before entering the gym.
3. Yes, I am aware that I have 15 min to set up for my party room time.
4. Yes, I am aware there is a questionnaire and final waiver to be signed AFTER the party.
5. I will respect other parties that are taking place and be punctual leaving the party room.
6. Pinatas are not allowed at this time, thank you for understanding.

Guardian Signature: _____ Date: _____

Staff _____ Date _____