



Seymour Gymnastics Center

BIRTHDAY PARTY F.A.Q.

How long is the party?

You have a choice of 1 ½ hours or 2 hours based on party package chosen.

When can parties be held?

Parties are held on Saturdays with the following times available:

1:00 – 2:30 for 1 ½ Hour Party Package

3:30 – 5:30 for a 2 Hour Party Package

Other days and times may be available on request.

How are refreshments handled?

We have a refrigerator and freezer available for your use.

How much does a party cost?

You now have a choice of a 1 ½ hour Party Package at \$135 or a 2 hour Party Package at a cost of \$150. You may have up to 12 non-sibling guests.

There is a charge of \$10 for each additional child.

For your safety a maximum of 20 children allowed.

A non-refundable deposit of \$50 is required to hold your date and time, with the balance due on the party date.

Who will host my party?

Seymour Gymnastics provides safe instruction through a variety of activities.

What ages of children may participate?

We celebrate birthday parties for ages 2 and up.

Parents are encouraged to stay for children under 3 years of age.

Anyone who would like to participate in gym must sign a waiver.

When should we arrive?

Staff will arrive 15 minutes before your party for you to decorate and you will have 15 minutes after your party to gather your belongings and guests to leave. Additional time will be charged at a rate of \$50.00 per hour.

If I have more questions?

Feel free to contact Seymour Gymnastics with any additional requests or concerns. We will do our best to accommodate you.



Seymour Gymnastics Center BIRTHDAY PARTY WAIVER

Date of Party _____ Party Name _____

I fully understand that Seymour Gymnastics staff members are not physicians or medical practitioners of any kind. With the above in mind, I hereby release Seymour Gymnastics to render temporary first aid to my child in the event of any injury or illness, and if deemed necessary by the Seymour Gymnastics staff to seek medical help and/or call an ambulance. I am aware that my son/daughter will be engaging in physical exercise involving sports and fitness which could cause injury to them. I agree that my son/daughter is voluntarily participating in these activities and is assuming all risks of injury that might result. I hereby agree to waive any claims or rights that he/she might incur as a result of these activities. Seymour Gymnastics will make no evaluation or recommendation whether my son/daughter is physically fit for any physical activity. I understand that if my son/daughter has any physical condition that may impair his/her ability to engage in the activities, it is my responsibility to obtain a physician's statement describing any limitations to participate in this program.

Child(ren)'s Name: _____

Phone Number(s): _____

Address: _____

Parent Name (Print): _____

Parent Signature: _____ Date _____

Please bring signed waiver on the day of the party or
sign a waiver upon entry at the gym.

Children can wear comfortable shorts and a t-shirt and/or a leotard.

Seymour Gymnastics Center
955 N. O'Brien St. Seymour, IN 47274
(812) 522-2798

Staff Assigned: _____

Seymour Gymnastics Center

Birthday Party Registration

Highlights of our fun-filled parties include:

- ☺ Qualified staff will supervise activities in the gym including use of gymnastics apparatus, foam pits, and trampolines!
- ☺ All clean-up is included – you do none of the work!
- ☺ Staff will arrive 15 minutes before your party for you to decorate and you will have 15 minutes after your party to gather your belongings and guests to leave. Additional time will be charged at a rate of \$50.00 per hour.
- ☺ Each party package is for 12 non-sibling guests. \$10 due for each additional guest. For your safety, a maximum of 20 children allowed.
- ☺ A non-refundable \$50 is required to reserve a time slot with the balance due on the party date based on the final count of participating guests.

Date Requested: ____/____/____ Saturday Sunday

Parties are for Saturdays & Sundays-Other days/times based on availability.

\$135 Party for 1 ½ hours total. Time Requested: _____

\$150 Party for 2 hours total Time Requested: _____

Child's Name: _____ Age: _____

Number of Party Participants: _____

Parent Name: _____

Address: _____

City: _____ Zip Code: _____

Telephone: _____

Parent Signature

Date

\$ _____ Deposit Paid – Method of Pmt _____

\$ _____ Balance Due at Party

\$ _____ Balance Paid - Method of Pmt _____

