



1701 Creditstone Road
 Vaughan, Ontario, Canada L4K 5V6
 Tel: 905.832.1660 Fax: 905.832.5888
 Web: www.highflyersgymnastics.ca

BIRTHDAY PARTY REGISTRATION FORM

Name of Birthday Child: _____

Email: _____ Phone #: _____

Contact person: _____ Party Package: _____

Party Date: _____ Party Time: _____ Extra gym time: _____

Child turning ? : _____ Age range of guests: _____

Party Package	Number of Participants **	Cost *	Package (Check one)
Shooting Star Package (1.20 hr in gym & 40 min in party room)	Up to 10	\$ 220.00	
	Each additional child	\$ 10.00	
Galaxy Package (1.20 hr in gym & 40 min in party room)	Up to 10	\$ 290.00	
	Each additional child	\$ 10.00	
Extra Gym time 1/2 hr		\$ 50.00	
Bouncy Castle		\$ 60.00	
Sandwich Platter from Subway (15 portion)		\$ 40.00	
		Total	\$

- All prices include the cost for the "Birthday child" + HST
- Payment in full is required before the Birthday Party to reserve the time slot.
- Final cost is adjusted depending on the number of actual participants.

** Defined as "any person going out on the floor, using the equipment and requiring supervision".

Age Specifications: Children aged 3 and under **MUST** be accompanied by an adult.

Refund Policy: Full refund provided if Birthday Party is cancelled more than one (1) week before the booking.
 Refund of 25% provided if cancelled less than one (1) week before booking.

For Office use only

Balance paid on: _____ **Receipt #** _____



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GROUP BIRTHDAY PARTY WAIVER FORM

Name of Birthday child: _____ Age (if under 18): _____

Address: _____ Phone Number: _____

Parent Name & Last Name: _____

Birthdays Parties are a structured supervised gymnastics activity where children and adults can play in the gym and use gymnastics equipment as permitted and as instructed. A N.C.C.P. certified coach is present to provide supervision, instruction and safety tips as needed. Children under the age of three (3) MUST be accompanied by an adult on the gym floor. Any adult accompanying a child is not required to complete a Birthday Party Waiver Form for him/herself.

* I understand and agree that HIGH FLYERS GYMNASTICS Inc. has tried to create a safe and controlled environment for safe participation and that it has established rules for participation on and about the gymnastics area that must be followed by the participant.

* I understand and agree that failure to comply with any such rules may result in removal from the gym. HIGH FLYERS GYMNASTICS Inc. reserves the right, at its absolute discretion, to remove a participant from the gym and/or property for the failure to adhere to any rule without refund or other recourse accruing to such participant.

* I understand and agree to abide by all "Gym Rules" including (but not limited to) those described below:

1. The Supervising Coach IS in charge and has full authority over all participants.
2. NO HORSEPLAY ALLOWED. The Supervising Coach has the authority to refuse or expel anyone.
3. All accidents/incidents must be reported to the Supervising Coach.
4. All equipment must be returned to its original place by the user.
5. One at a time on the trampoline. No flips or "head-first" or prone entries into the pit (no head or prone falls). "Feet-first" ONLY.
6. Any skill which is unfamiliar to a person cannot be performed.
7. No dress shoes, boots or dirty runners allowed on the gym floor. No socks on beam.
8. No smoking or alcohol is allowed. Anybody appearing to be impaired will be immediately expelled.
9. No jewelry allowed (long earrings, bracelets, rings, watches).
10. No shouting, swearing or rude language.
11. Long hair must be tied back.
12. No jeans or ripped pieces of clothing allowed.
13. No gum, candy, food or drink allowed past the viewing area.
14. When and if required, the Supervising Coach will implement the Emergency Policy and Procedures.
15. No loose objects allowed on trampoline (i.e balls, hoops etc...)
16. Swinging on rings is NOT allowed.
17. Rope climbing can be done only if a crash mat is placed under the rope.
18. Use of the equipment is strictly forbidden without the proper supervision of a qualified HIGH FLYERS GYMNASTICS CLUB Inc. coach.

* I understand and agree that I, and the children participating in the birthday party, must abide by any additional "Gym Rules" which may be posted in the gym, dictated, published and/or circulated from time to time.

* I acknowledge that gymnastics and other activities offered at HIGH FLYERS GYMNASTICS CLUB Inc., may involve a certain element of risk, which may result in bodily injury (including the risk of severe or fatal injury) to myself or the children attending the birthday party.

* I also acknowledge that gymnastics may require the Coach to perform some manual spotting which involves direct physical contact and is designed to assist the participant in the safe performance of the program skills.

* I confirm that I, or the children, am/are fit to participate in gymnastics and I am unaware of any physical or mental condition or impediment, which would prevent or hinder myself or the children from participating safely in the programs at HIGH FLYERS GYMNASTICS CLUB Inc.

* I confirm that I have accurately reported and disclosed any medical information (physical and mental) to HIGH FLYERS GYMNASTICS CLUB Inc., which is necessary for the proper gymnastics involvement and care of the above-mentioned child/person.

* I hereby authorize basic first aid to be delivered to myself or the participating children by HIGH FLYERS GYMNASTICS CLUB Inc. or other authorities. By administering basic first aid when required or requested, HIGH FLYERS GYMNASTICS CLUB Inc. in no way warrants or assumes any liability in relation to the administration of such basic first aid.

* I understand and agree that, in the case of an emergency HIGH FLYERS GYMNASTICS CLUB Inc. assumes no responsibility or obligations relative to any cost or expense related to carrying out any emergency procedures and/or emergency transportation for myself or the participating children.

In consideration of your acceptance of my participation and/or the children participating in, intending to be legally bound, do hereby, for myself and/or the children, heirs, executors and administrators waive the right to sue and release forever and discharge any and all rights and claims for losses, damages and/or injuries which I and/or the participating children may have or may hereafter accrue against HIGH FLYERS GYMNASTICS CLUB Inc., or their respective officers, agents, representatives, employees, volunteers, officials, sponsors, directors, agents, coaches, instructors or independent contractors and/or assigns for any losses, damages and injuries which may be sustained and suffered by me and/or the participating children in connection with our association with or entry in the above athletic activity or which may arise out of our participating in said athletic activity.

IF participant is UNDER 18 years of age

NAME OF PARENT/LEGAL GUARDIAN: _____

Signed: _____ Date: _____

IF participant is AT LEAST 18 years of age

Signed: _____ Date: _____

Failure to sign and return this waiver form will result in not being admitted in the gym.