

Contact phone during party:
Child participating:
Obild podicipating:
Date: Signature of Parent or Guardian:
Cell: :II=O
City:Sip:Phone:
Address:
Parent(s) Name:
must be signed by a parent or legal guardian before participation in any activities. My child may participate in the Birthday Party:
organization or individuals identified above. This form
in the event, except where such losses or damages are the result of the intentional or reckless conduct of one of the
damages occurring as a result of my child's participation
I agree that Wichita Gymnastics employees, agents, officers and directors shall not be liable for any losses or

## YOU ARE INVITED TO A BIRTHDAY PARTY!

DIKINDAT PAKIT:
For:
Date:
Time:
Place: Wichita Gymnastics Club 9400 East 37th Street North in Wichita, 67226 634-1900 • www.wichitagym.com
RSVP TO:
NAMF:

PHONE:

## We'll have so much FUN

Wichita Gymnastics Waiver and Release

at Wichita Gymnastics!

We'll play games, climb a rock wall, zip on the zip line, run the obstacle course, find our way through a maze and have a ring challenge. And of course, we'll have birthday treats!

Please wear casual active clothes - leotards are fine!

## Important:

Please sign the Waiver and Release on the back of this invitation and bring it with you!

