

# BIRTHDAY PARTY

You are cordially invited to a Birthday Party for: \_\_\_\_\_

at **CAPITOL CITY GYMNASTICS** located at 3518 Rohr Road, Groveport, Ohio, 43125 (corner of Hamilton Road and Rohr Road).

The party will be held: \_\_\_\_\_ (Date)

\_\_\_\_\_ (Time)

During the Birthday Party we will be doing gymnastics on the floor, swinging on the bars, and jumping on the trampoline. Each child needs to be dressed in a t-shirt and elastic shorts/sweatpants with bare feet. Long hair should be tied back in a pony tail (no jewelry please). This will be followed by cake and ice cream and presents!

**\*\*PLEASE FILL OUT THE FORM BELOW AND BRING THIS TO THE PARTY WITH YOU\*\***

If you have any questions you can either contact me at: \_\_\_\_\_

or Capitol City Gymnastics directly at: 614-409-7655.

Thanks, we can't wait to see you there!



B'Day Child's Name: \_\_\_\_\_ Birthday Party Date: \_\_\_\_\_

Your Child's Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Parent's Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

*Medical and Liability Release: I hereby consent and grant authority to the staff at Capitol City Gymnastics to make any medical judgment concerning medical attention in the event of an emergency or accident during my absence. Understanding the possibility of an injury in any athletic or physical endeavors, I hold Capitol City Gymnastics and its staff harmless for any and all injuries arising out of taking part in any classes, workouts, exhibitions and competitions at Capitol City Gymnastics, in route or away. Additionally I authorize Capitol City Gymnastics to display portraits of my child on their website at [www.capitolcitygym.com](http://www.capitolcitygym.com). Pictures may also be used in media and/or advertising.*

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Happy Birthday!!