

# YOU'RE INVITED TO A PARTY AT GYM CATS GYMNASTICS CENTER

given for \_\_\_\_\_

date \_\_\_\_\_

time \_\_\_\_\_

rsvp \_\_\_\_\_

- Children should wear sweats or shorts, t-shirt or leotards.
- Long hair should be tied back, and no jewelry.
  - ONLY PARENTS OF BIRTHDAY CHILD ARE ALLOWED ON GYM FLOOR (with the exception of 2-3-year-olds).
  - ALL PARTIES BEGIN AND END PROMPTLY.
  - Parties are for invited guests only.

One Odell Plaza, Yonkers, NY 10701  
(914) 965-7676  
www.GymCats.net

### From the North:

Take 287 to 87 South. Exit immediately for Saw Mill Pkwy South. Exit at Executive Blvd. Make second left onto Enterprise Blvd. Go to stop sign. Proceed past stop sign and make a right into parking area. The gym is on the left-hand side.

### From the South:

Take Henry Hudson Pkwy North to Saw Mill Pkwy. Proceed to Executive Blvd. Exit and follow directions above.

### From the East:

Hutchinson River Pkwy or Bronx River Pkwy to the Cross County Pkwy West. Take Cross County to Saw Mill Pkwy North. Proceed as above.

### From Hastings, Dobbs, Irvington:

Take North Broadway (Rte. 9) South. Make left at Executive Blvd. Make the first right onto Exec. Plaza. Go to the stop sign, cross Odell Terrace, and make an immediate left up the small hill. The gym is on the right-hand side.

**Parent or Guardian: Please read, then sign and date and give to party instructor.**

### **Participant Agreement and Information:**

*Read the following carefully and sign below. NOTE: Parent signs if student is under 18 years. Fill in all blanks, submit forms for current season only bearing original signatures (photocopies or facsimiles not acceptable).*

#### **Agreement:**

In consideration of my participation in Gym Cats events and activities, I agree to be bound by each of the following:

1. Eligibility: I agree to comply with the rules of Gym Cats.
2. Readiness to Participate: I will only participate in those Gym Cats events and activities for which I believe I am physically and psychologically prepared.
3. Medical Attention: I hereby give my consent to Gym Cats and/or the Host Organization to provide, through a medical staff of its choice, customary medical/athletic training attention, transportation, and emergency medical services as warranted in the course of my participation.
4. Waiver and Release: I am fully aware of and appreciate the risks, including the risk of catastrophic injury, paralysis, and even death, as well as other damages and losses associated with participation in gymnastics activities and events, including use of inflatables.

I further agree that Gym Cats, and the sponsor of any Gym Cats event, along with the employees, agents, officers, and directors of these organizations shall not be liable for any losses or damages occurring as a result of my participation in the event, except where such loss or damage is the result of the intentional or reckless conduct of one of the organizations or individuals identified above.

#### **Information:**

Primary Medical Insurance: I am covered by primary health/medical/accident insurance.

through: \_\_\_\_\_ Signature of Participant: X \_\_\_\_\_

*For any participant who is not yet 18 years old:* As legal parent or guardian of this participant, I hereby verify by my signature below that I fully understand and accept each of the above conditions for permitting my child to participate in events and activities conducted by Gym Cats.

Printed name of Parent/Guardian \_\_\_\_\_

Signature of Parent/Guardian: X \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_