

HALLOWEEN SLEEPOVER

Who? Girls ages 7 and up

Where? Ricochets Gymnastics (362 S. Warminster Rd. Hatboro, PA 19040)

When? Saturday, October 22nd, **8:00PM**. (for security purposes, the doors will not open until 8PM, and will be re-locked at 8:30PM). Only registered guests will be allowed in. Pick-up is Sunday, October 23rd, **9:00AM**.

What? Games, Contests, Open gym, prizes and more!

Cost? \$45.00 (includes late night snack, breakfast, & age appropriate movies).

Food Allergies/Medical Conditions? Please inform us at time of registration if there are any special conditions or Allergies/Medical Conditions that will require our attention.

What to bring? Come dressed in costume, and bring sleeping bag, pillow, toiletries (including make up remover if necessary), pajamas, and changes of clothes for playing gymnastics and for Sunday morning. **PLEASE NOTE: NO** food or gum is allowed. **NO** cell phones, tablets or other electronic devices (upon request, any necessary phone calls will be made through the office number)



This annual event is organized and supervised by Ricochets Staff. Space is limited to 100 current Ricochets students (if there is space available, non-student reservations will be accepted as of 10/14- application can be turned in with the members, and we will wait list them according to when received). **LIMITED AVAILABILITY-** Reservations accepted on a first come-first served basis.

Mail registration form and \$45 cash or check payable to "Ricochets" (address above) or hand in at front desk.

50% credit if cancelled on/before 10/14/16, no refund after this date

**** PLEASE PRINT ****

Student Name _____ AGE _____ D.O.B. ____/____/____

Emergency Contact: for 10/22 p.m. through 10/23 a.m.

Name (_____) Phone # _____

Allergies/Medical Conditions _____

As the parent(s) or legal guardian(s) of the student(s) named above, I hereby consent to his/her participation in the programs offered by Ricochets Gymnastics, Inc. and to the use of all facilities at Ricochets Gymnastics, Inc. As a condition to participation in RICOCHETS programs, I hereby release and forever discharge Sarah Lang and Christopher Zimmerman and/or any employees, or any individual acting on behalf of RICOCHETS, and connected with this program in which I, or my child may participate, from any and all claims, demands, or losses of every kind and nature which may result to my child, myself, or my heirs, except where such losses or damages is the result of the intentional or reckless conduct of one of the organizations or individuals identified above. I recognize and acknowledge all risks involved in participation in the above program and assume all risks inherent in participation in the same. I am aware that individual and group publicity photos and videos are taken from time to time, and I hereby grant permission for my or my child(ren)'s likeness to be used in Ricochets Gymnastics publicity or advertising. I have read and fully understand this liability waiver, and agree to the club policies.

PARENT/GUARDIAN'S SIGNATURE _____ DATE _____