

HALLOWEEN SLEEPOVER



October 26th 8:00pm - October 27th 9:00am

For security purposes, the doors will not open until 8PM and will be re-locked at 8:30PM on October 26th. Only registered guests will be allowed in.

Pick-up is Sunday, October 27th, 9:00AM.

For girls ages 7 & up

at Ricochets Gymnastics (362 S. Warminster Rd. Hatboro, Pa 19040)

\$50 per person

Includes late night snack, breakfast & age-appropriate movies.

Games, Costume Contests with Prizes & MORE!

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).

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

This annual event is organized and supervised by Ricochets Staff. Space is limited to 110 current Ricochets students (if there is space available, non-member 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, only held with full payment and completed form.

Full cash or check payment due with registration form.

50% credit if cancelled on/before 10/14/19, no refund after this date.

Please complete information below and return, with full payment, to the front desk, or mail to:
Ricochets Gymnastics at 362 S. Warminster Rd., Hatboro, Pa 19040.

Student Information (one application per student)

Student's First Name: _____ Last Name: _____ Age: _____

Member Non-Member Medical Notes: _____

Contact's Primary Phone Number: _____

Non-member reservations will be accepted as of 10/14/19- application can be turned in with the members, and we will wait list them according to when received.

Emergency Contact Information (during event hours)

Name: _____ Relation to child: _____ Primary Number: _____

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: _____