



Halloween Sleepover on Friday, October 22nd

This sleepover includes:  **Open Gym**  **Pizza Party**  **Games & Activities**
 **Movies**  **Breakfast**

Simply complete the bottom portion of this form and return it to the office.
Children may be dropped off at 7:30pm Friday, and picked up no later than 8:30 on Saturday!

**WE GUARANTEE THIS SLEEPOVER WILL BE A TREAT!
DON'T FORGET YOUR SLEEPING BAG & PILLOW**

PRESTIGE'S HALLOWEEN SLEEPOVER

Drop off on Friday, October 22nd at 7:30pm, Pick-Up on Saturday, October 23rd at 8:30am

(child's name) _____ **will be attending the sleepover**

Parent's Signature

Parent's Name Printed

EMERGENCY CONTACT NUMBER _____

- Attached is \$35 for my child
- Attached is \$30 for my daughter, who will be bringing ONE friend, who will also be bringing \$30
- Attached is \$25 for my daughter, who will be bringing TWO friends, who will also be bringing \$25 each
- Attached is \$20 for my daughter, who will be bringing THREE friends, who will also be bringing \$20 each

I understand that participation in gymnastics involves motion, rotation, and height in a unique environment and as such carries with it the risk of injury. I understand that I will be responsible for the primary expenses which may occur from my child's participation at Prestige Gymnastics.

My policy is through: _____ and the policy # is: _____.

I have read all the policies listed above and agree to adhere to these policies.

Signature _____ **date** _____

With the above in mind, and being fully aware of the risks and possibility of injury involved, I consent to have my child or children participate in the programs offered by Prestige Gymnastics. I, my executors or other representatives, waive and release all rights and claims for damages that I or my child may have against Prestige Gymnastics and or its representatives whether paid or volunteer.

Signature _____ **date** _____

Name Printed _____