



# Birthday Sign-Up Form



Today's Date \_\_\_\_\_ Date of Party \_\_\_\_\_

Childs Name \_\_\_\_\_ Age \_\_\_\_\_ Male Or Female \_\_\_\_\_

Person Making Reservation \_\_\_\_\_ Phone# \_\_\_\_\_

Time Of Party: Friday 5:30-7:30 p.m. \_\_\_\_\_  
Saturday 12:00-2:00 p.m. \_\_\_\_\_

Decorations: Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, color, theme, etc. \_\_\_\_\_

Type of Pizza \_\_\_\_\_ 2 (Large) \_\_\_\_\_ Type of Soda (2) or Bottled Water (1 case) \_\_\_\_\_

Cheese \_\_\_\_\_ Cola \_\_\_\_\_

Pepperoni \_\_\_\_\_ Diet \_\_\_\_\_

Sausage \_\_\_\_\_ Root Beer \_\_\_\_\_

Lemon/Lime \_\_\_\_\_

Bottled Water \_\_\_\_\_

Price of Party \$ \_\_\_\_\_ Total # of Kids \_\_\_\_\_

Payment is due in full when making reservation.

Staff Signature: \_\_\_\_\_



I, (the adult hosting a birthday party at the YMCA), take responsibility for all participants Involved. In the unlikely event of accidental injury and or sickness, while participating in this birthday party, medical treatment may need to be obtained. The YMCA will not be held liable for any medical expenses that may be incurred. Parents of any children will be notified as soon as possible, however, the acting physician, (if taken to a hospital), may make all decisions regarding care for a child. Each parent is responsible for any expenses with their child in the event of such an emergency.

By Checking this box, I understand that my personal items and the personal items of my guests are each individual person's responsibility. I understand that that the YMCA encourages me to bring a lock to secure my personal items in the locker rooms.

Sign: \_\_\_\_\_ Date: \_\_\_\_\_