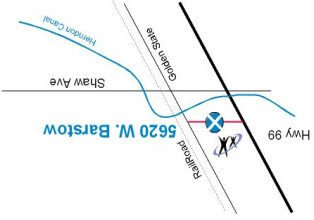


GET THE MOST OUT OF YOUR PARTY EXPERIENCE!

- Gymnastics activities require running, tumbling, swinging, climbing, and more, so please dress comfortably in t-shirts and shorts or sweatpants. Shoes may **not** be worn on the gym floor. Bare feet or slipper socks (with grippers) are recommended.
- Cubicles are free to use to store shoes and other personal belongings.
- Call your friends below and let them know how many people are attending the party by the indicated RSVP date. They are required to pay for each individual child over 24 months and under 18 years old. An accurate count of adults is also needed for proper seating.
- A timely arrival is appreciated and very important (no more than 5 minutes early). This allows for everyone to enjoy our announcements and be properly stretched before participating in any floor activities.
- The physical condition and safety of each child is our top priority. Therefore, we ask that every child be in good health. There will be coaches on hand to assist and ensure safety for everyone.



DON'T MISS OUT ON THE FUN!

5620 West Barstow Ave., Fresno, CA 93722
 (1/2 miles North of Shaw & Golden State Blvd)
 (559) 271-9400 • www.gymnasticsbeat.com

You're Invited

to hang out with ME

at my

Gymnastics
BEAT INC

BIRTHDAY PARTY!

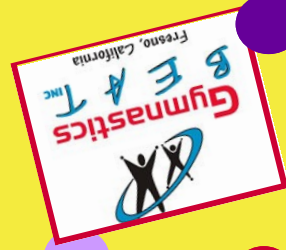
Swing
 Climb
 Bounce
 Jump
 Tumble

A PARTY INVITATION
 JUST FOR YOU!

FROM:
 Gymnastics Beat, Inc.
 5620 West Barstow Avenue
 Fresno, CA 93722
 (559) 271-9400

DON'T
 FORGET
 A STAMP!

Come and have a swingin' good time!



To: _____

FOR: _____ AGE: _____

DATE: _____

TIME: _____

RSVP by _____ by calling _____

Special Notes: _____

_____ We will be reserving seats and need to know the exact count! Thanks!

----- GUESTS: Please bring below waiver to party, signed by parent, in order to play on equipment! -----

For Parents: I represent that I am the parent or legal guardian of the child(ren) below. I agree that my child(ren) named below and I shall comply with all stated and customary terms, posted safety signs, rules, and verbal instructions as conditional for participation in the birthday party. I understand that participation in Gymnastics Beat birthday parties involves motion, rotation, and height in an injury environment and as such, carries with it a reasonable assumption of risk, paralysis, and even death, which can result from improper conduct of the activity. I understand that reasonable care, safety, and prudence will be used in the instruction of my child. I waive and release all rights and claims for damages that may occur in connection with the birthday party. I confirm that my child(ren) listed below is/are in good health.

CHILD'S NAME--LIST UP TO TWO NAMES _____

BIRTHDAY(S) _____

PARENT SIGNATURE _____

DATE _____

EMERGENCY CONTACT # _____

 Check here and complete the Address Block on the reverse if you want to receive flyers and mailings from Gymnastics Beat.