

# Have Your Birthday Party



*Uzelac Gymnastics  
(Gymnastic or Warrior)*



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Johnstown, PA 15904  
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**Choose from one of our following Theme Parties!**

***\*Gymnastics Parties \*Warrior Parties\****

**Something Special with Each Party! Call for more details.**

Celebrate your Child's Birthday Party at Uzelac Gymnastics with fun and games!  
We provide *1 hour* of "Fun-Nastics" in the main gym and *30 minutes* in our party room area.  
Call our office and book your Birthday Party, TODAY!

**Choose from 1 of the following 3 Party Packages!**

<b><u>Red Package</u></b>	<b><u>White Package</u></b>	<b><u>Blue Package</u></b>
<p><b><u>Up to 10 Kids</u></b> - You receive the following:</p> <ul style="list-style-type: none"> <li>Instructor(s)- Safety Certified</li> <li>1hr -structured gym time with instructor in main gym.</li> <li>30min-In Party Room with Tables and Chairs.</li> <li>10 Invitations</li> <li>1- Pizza (1 slice per child)</li> <li>Tables, chairs, table covers, plates, cups, napkins, and utensils.</li> <li>Setup &amp; Cleanup of Party Area.</li> </ul> <p>Cost: Members: \$160.00 Non-members:\$210.00</p> <p>\$50.00 Deposit is required during registration.</p>	<p><b><u>Up to 20 Kids</u></b> - You receive the following:</p> <ul style="list-style-type: none"> <li>Instructor(s)- Safety Certified</li> <li>1hr -structured gym time with instructor in main gym.</li> <li>30min-In Party Room with Tables and Chairs.</li> <li>20 Invitations</li> <li>2- Pizza (1 slice per child)</li> <li>Tables, chairs, table covers, plates, cups, napkins, and utensils.</li> <li>Setup &amp; Cleanup of Party Area.</li> </ul> <p>Cost: Members: \$240.00 Non-members: \$290.00</p> <p>\$75.00 Deposit is required during registration.</p>	<p><b><u>Up to 30 Kids</u></b> - You receive the following:</p> <ul style="list-style-type: none"> <li>Instructor(s)- Safety Certified</li> <li>1hr -structured gym time with instructor in main gym.</li> <li>30min-In Party Room with Tables and Chairs.</li> <li>30 Invitations</li> <li>3- Pizza (1 slice per child)</li> <li>Tables, chairs, table covers, plates, cups, napkins, and utensils.</li> <li>Setup &amp; Cleanup of Party Area.</li> </ul> <p>Cost: Members: \$320.00 Non-members: \$370.00</p> <p>\$100.00 Deposit is required during registration.</p>

*Gymnastics and Theme Parties (4yrs-15yrs)*

**1 ½ Hours of FUN!**

**See Prices above!**

**Please contact for available times!**



<i>Fri</i>	<i>Sat</i>	<i>Sun</i>
		12:00PM
		1:00pm
	2:00pm	2:00pm
	3:00pm	3:00pm
	4:00pm	4:00pm
n/a	5:00pm	
n/a	6:00pm	



**CHOOSE FROM THESE 2 PARTY THEMES (Circle One)**

**Gymnastics Party**

**Warrior Party**

**BIRTHDAY PARTY CONTRACT**

(Parent's/Guardian Name)

(Child's First Name)

(Child's Age)

BIRTHDAY PARTY AGREEMENT WITH \_\_\_\_\_ FOR \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIPCODE \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ DATE OF PARTY \_\_\_\_\_ TIME \_\_\_\_\_ NUMBER OF GUESTS \_\_\_\_\_

PACKAGE FEE: \$ \_\_\_\_\_

\*DEPOSIT FEE: \$ \_\_\_\_\_ (A\$50.00, \$75.00, or \$100.00 non-refundable deposit is required, depending on which party package you choose)

AMOUNT RECEIVED: \$ \_\_\_\_\_

BALANCE: \$ \_\_\_\_\_

**PLEASE READ THE FOLLOWING:**

In accepting this contract, you acknowledge the following:

1. Other parties may precede or follow yours, so the 1 ½ hour total time limit must be adhered to. (1 hour of gymnastics, warrior, and/or activities, ½ hour in the party room for the party. Please arrive within 15 minutes of the start of your party). Additional time maybe purchased for \$60.00/half hour. Any additional time will be charged automatically if you fail to adhere to the rules.
2. We will provide 1 hour of supervised gym time and/or activities time in the gym area, ½ hour of time for the use of the party room, party invitations, tables, chairs, refrigerator, table coverings and all the dinner ware and utensils.

**It is your responsibility to provide the cake, ice cream and drinks and any other party accessories that you will need for your party!**

3. The deposit fee for the party is your confirmation. Your time slot CANNOT be reserved without the deposit fee. The balance MUST BE paid in full before the start of the party. If the amount of guest exceeds the contracted number, you will be charged an additional \$18.00/additional child fee
4. You must call at least 4 DAYS prior to the party, if additional guest will be added and there is a need for additional coaches. The fee increases by \$18.00 for each additional guest.
5. You must call at least 4 DAYS prior to the party, if guest will be deleted and there is a need for fewer coaches. If you do not let us know you will be charged for the full contracted amount.
6. If the gym is closed due to inclement weather or some unforeseen problem, every effort will be made to re-schedule your party at a time satisfactory to you.
7. For SAFETY REASON, no children are permitted on the gym floor area and/ or any apparatus before or after the 1 hour of gymnastics and/or activities time. Siblings that are not participating in the party must remain in the party room supervised by their parents. Parents must remain off the gym floor area except to take pictures.
8. Any child under 2 years of age, that is participating in the party, MUST have a parent with them at all times during the duration of the party (including the gymnastics/activities time) (NO EXCEPTIONS)

**RELEASE AGREEMENT:** Acceptance of this contract for a Birthday Party held at Uzelac Gymnastics is without assumption of responsibility of any kind by the Uzelac Gymnastics program and staff for injuries or losses which may be suffered or sustained in connection with activities during the period of time of the birthday party. Birthday party participants are expected to carry their own accident and/or medical insurance. Coaches, Instructors, and Staff of Uzelac Gymnastics are safety conscious and follow appropriate safety precautions. In event of injury or illness, every effort will be made to contact the parents or guardians of the birthday party participant. If necessary, I authorize the Uzelac Gymnastics to administer first aid and/or medical treatment.

Signature of Parent: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Uzelac Representative: \_\_\_\_\_