



Building Healthy Minds and Bodies since 1977

## ***Birthday Party Registration Sheet***

Family Last Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: # \_\_\_\_\_

Contact Person: \_\_\_\_\_ # of Participants \_\_\_\_\_ Age Range \_\_\_\_\_

Birthday Person: \_\_\_\_\_ Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Today's date: \_\_\_\_\_ Party Date: \_\_\_\_\_ Gym Time: \_\_\_\_\_ Party Room: \_\_\_\_\_

	<b>First Name</b>	<b>Last Name</b>
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

NOTE: This form is to be **returned on the day of the party** with those children attending the party included. **Only** children listed on this list are to be in the gym. This form is sent to Gymnastics BC and is your registration, and insurance form.

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