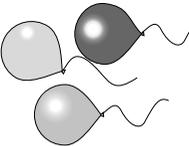


Have a **HAPPY BIRTHDAY** at **TOP FLIGHT GYMNASTICS**



The Top Flight PARTY PACKAGE

A birthday party at **TOP FLIGHT GYMNASTICS CENTER** is a fun and exciting day for a memorable birthday party experience. Mature, skilled instructor(s) lead children in cooperative games, relay races, obstacle courses, and fun gymnastics activities for one hour leaving the remaining half-hour of "party time" for refreshments and present-opening under parental supervision in our private party room. There may be times where the gym is occupied by other gymnastics groups. Special arrangements for other snacks or activities can be arranged with approval of the **TOP FLIGHT GYMNASTICS** staff.

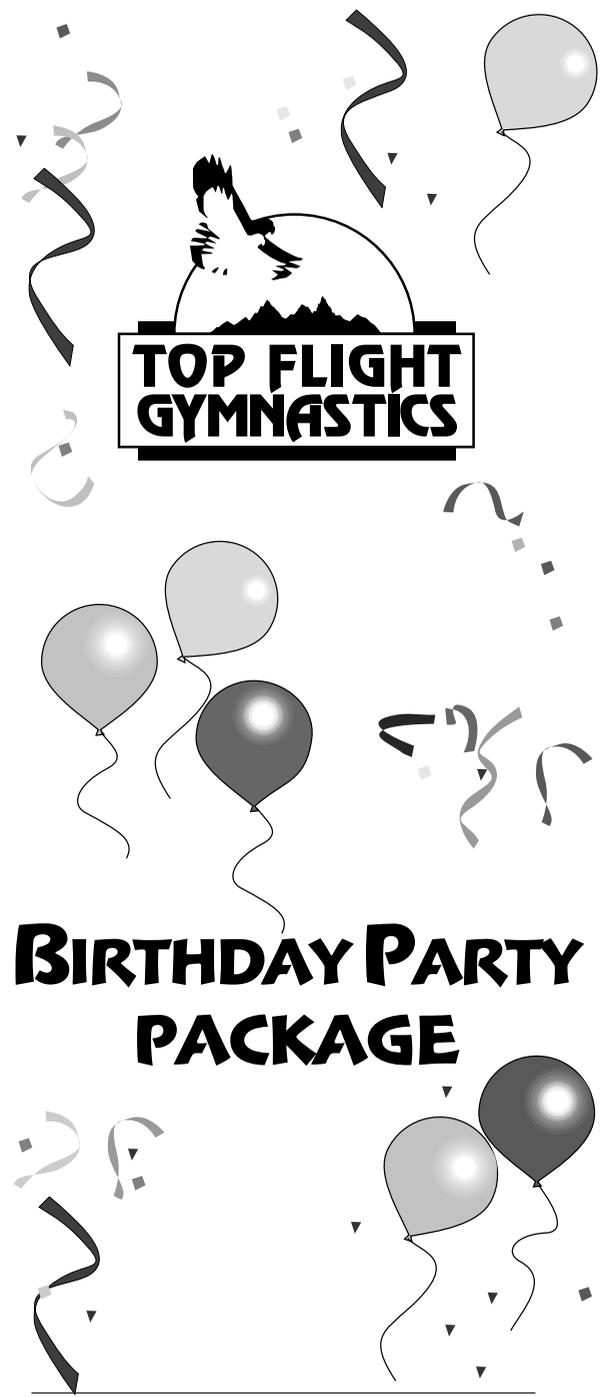
The Party Package includes:

-  Party invitations
-  Helium balloons
-  Free passes to attend one gymnastics class for each child



9179 Red Branch Road
Columbia, MD 21045
Website: www.TopFlightGym-md.com

Bulk Rate
U.S. Postage
PAID
Ellicott City, MD
Permit No. 91



BIRTHDAY PARTY PACKAGE

9179 Red Branch Road
Columbia, MD 21045
(410) 992-1600

MAKING RESERVATIONS

Reservations can be made as early as three months in advance of your child's birthday by mail or in person. A \$50 deposit (non-refundable) along with the completed Birthday Party application must be received by **TOP FLIGHT GYMNASTICS** when making reservations. **Birthday parties are offered on a space and teacher availability basis.** Call for reservations at (410) 992-1600.

PARTY TIMES

Parties are only held on **Sunday afternoons** (depending on teacher availability). Party times are as follows:

12:30-2:00*Room A
2:00-3:30*Room B

*Party times can be extended an extra 1/2 hour for an additional \$30 fee. This fee must be included in the initial deposit for a total deposit of \$80.

PARTY PRICES

Party guests must be between **3 and 14** years of age.

Up to 12 children (1 teacher).....\$200
(child count includes the birthday party child)

For parties which exceed the number of guests for the designated party size, a \$20 per child charge will be applied to the remaining balance.



IMPORTANT INFORMATION FOR PARENTS...



What to Bring

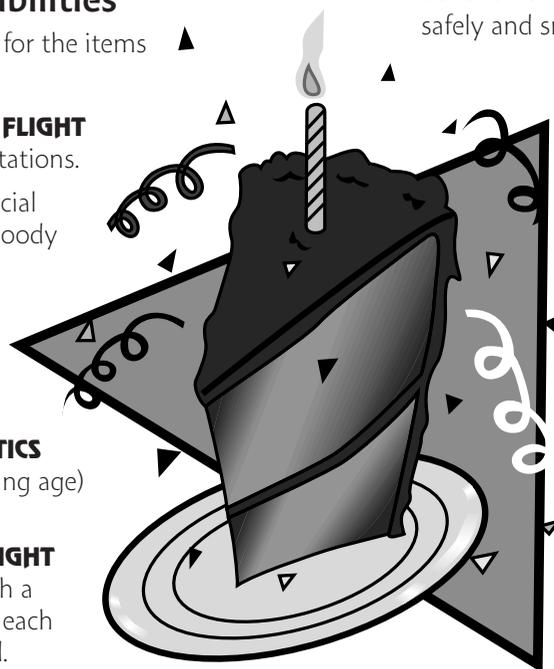
Some suggestions on what to bring include:

-  Snacks and pizza
-  Party decorations
-  Goody bags
-  Camera and/or video camera (no flash photography is allowed in the gym area)

Parent Responsibilities

Parents are responsible for the items listed below:

-  Sending out **TOP FLIGHT GYMNASTICS** invitations.
-  Providing any special decorations and goody bag treats.
-  Providing a host parent to be present at all times.
-  Supplying **TOP FLIGHT GYMNASTICS** with a list (including age) of all participants.
-  Providing **TOP FLIGHT GYMNASTICS** with a signed release for each participating child.
-  Escorting late-arriving children into the gym area if no teacher is readily available to do so.



What to Wear

As this is a gymnastics party, children should be dressed accordingly. Children may wear leotards, sweat suits, or comfortable shorts and fitted T-shirts. Long hair should be tied back and no jewelry should be worn.

Parent Pointers

The set of rules listed below are expected to be followed to ensure that your party runs safely and smoothly.

-  Arrive no earlier than 15 minutes before your party is scheduled.
-  Food is allowed only in the party room area.
-  Smoking is prohibited in the facility.
-  **Parents of other children must stay outside of the gym area.**
-  **No flash photography is allowed in gym area.**
-  **TOP FLIGHT** is not responsible for lost or stolen articles.

BIRTHDAY PARTY APPLICATION



Name of Birthday Child _____

Age _____ Phone _____

Parent(s) Name _____

Street Address _____

City _____ State _____ ZIP _____

Party Date _____ Requested Time _____

No. of Expected Guests _____ Ages of Children Participating _____

Party guests must be between **3 and 14** years of age. Party may include up to 12 children (1 teacher)\$200
(child count includes the birthday party child)

_____ A \$50 deposit is included with this application.

_____ I'd like to add 1/2 hr to the length of the party. The \$30 fee will be added to the \$50 deposit for a total deposit of \$80.

For parties which exceed the number of guests for the designated party size, a \$20 per child charge will be applied to the remaining balance.

Release

The undersigned parents or guardians of the participant, _____, or and _____, in further consideration of the **TOP FLIGHT GYMNASTICS CENTER** program, accepting said participant, hereby agree to save and indemnify and keep harmless the said **TOP FLIGHT GYMNASTICS CENTER**, its agents and sponsors, against any and all liability claims, judgements or damage arising as a result of injuries sustained by the participant during or as a result of any course of instruction or supervision given the participant by **TOP FLIGHT GYMNASTICS CENTER**.

Parents/Guardian Signature _____

Date _____

For Staff Use Only:

Total Cost of Party _____
Amount of Deposit _____
Additional Charges _____
Total Amount Due _____