

# Will You Be My Val Pal?

Your kids will enjoy:

- Gymnastics
- Trampoline
- Inflatable
- Games

You will enjoy:

- Class Discounts



Guest's Name:

\_\_\_\_\_

Invited By:

\_\_\_\_\_

Permission Form on back.

Free Party For Ages  
18 Months - Kindergarten\*  
and Parents or Caregivers!

\_\_\_\_\_ Monday, 2/13

9:30 a.m. - 10:30 a.m. **or**

\_\_\_\_\_ Thursday, 2/16

1:30 p.m. - 2:30 p.m.

**Please bring this invitation with you!**

*\*Kids must remain under the supervision of the caregiver that brings them to the party.*

Gymnasticsspot.com  
874-949-SPOT



## Permission Form

My child has my permission to attend and participate in The Gymnastics Spot "Val Pal Party". I attest to this person's good health. I will, in no way, hold The Gymnastics Spot officials or staff members responsible for any possible accident, illness, or injury, which may occur in any workout or training session. I also give my permission to The Gymnastics Spot to call an ambulance in the event of an accident, illness, or injury.

I have read the above statement and fully understand it and agree to abide by it.

PARENT'S OR GUARDIAN SIGNATURE: \_\_\_\_\_

CHILD'S NAME: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
(Street) (City, State ) (Zip)

TELEPHONE: \_\_\_\_\_ EMERGENCY NUMBER (S): \_\_\_\_\_

PARENT/GUARDIAN: \_\_\_\_\_

Email address: \_\_\_\_\_

\_\_\_\_\_ I give permission for my child's image (e.g., photo) to be used in upcoming promotional materials.

**Please bring filled out card to the party.**