

# Kid's Night Out

**Cheapest & the BEST Sitter in town!!!**

NEXT K.N.O.

February 25th  
6:00 Pm to 9:00 Pm

## Options & Pricing

| Option 1  | Option 2   |
|---|--|
| <b>Full Event</b><br>\$15 per child<br>\$10 additional siblings | <b>Open Gym Only</b><br>(6:00 - 7:30)<br>\$7 per child |



149 Washington St.  
Plainville, MA 02762  
508-695-2600

# It Is Another FUN Night at G.A.B.

## With Your Favorite Coaches!

Come JOIN the FUN with  
**Ms. Holly & Mr. Allen**

...Join THEM and your FRIENDS for an hour and a half of Open Gym FUN during the first half of the event (6:00-7:30), or stay for the whole thing! The Open Gym will be followed by a MOVIE and snack. **SPACE is LIMITED!**

**Pre-registration Required by 2/22/12**

(...due to Space & Scheduling)

### Please NOTE:

Unfortunately, the last few K.N.O.s we were forced to turn **last minute walk-ins** down due to our event being already **overbooked!!!** We are excited that our K.N.O's are this popular and truly encourage everyone to **pre-register!** 😊

## Kids Night Out Registration

Child's Name: \_\_\_\_\_ Birthday: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Age: \_\_\_\_\_

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Child's Name: \_\_\_\_\_ Birthday: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Age: \_\_\_\_\_

Mother's Name \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Father's Name \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

Are there any Medical Conditions to which we should be alerted \_\_\_\_\_

Full Event Total: \$ \_\_\_\_\_ Open Gym Only Total: \$ \_\_\_\_\_

K.N.O Total: \$ \_\_\_\_\_ Payment method: \_\_\_\_\_ Date: \_\_\_\_\_

### Acknowledgment of Risk and Waiver of Liability

As the parents or legal guardians of \_\_\_\_\_ we hereby give permission for our child to participate in programs at Gymnastic Academy of Boston/Gymnastic Academy of Plainville, Inc. We recognize that gymnastics/dance is a sport that involves height, rotation of the body and inflatables, and there are inherent risks involved. On behalf of our child and on our own behalf, we agree to waive all claims against Gymnastic Academy of Boston/Gymnastic Academy of Plainville, Inc and its owners, staff and instructors for any liability, loss, cost, damage, medical expense, long-term care or emotional distress arising out of any personal injury, including total disability, paralysis and death, which may occur to any of our children while on the premises of or under the instruction, supervision, or control of Gymnastic Academy of Boston/Gymnastic Academy of Plainville, Inc. We hereby testify to our child's sound health of mind and body and we authorize Gymnastic Academy of Boston/Gymnastic Academy of Plainville, Inc to seek medical treatment at the nearest medical facility in case of emergency.

We have read and understand all the above and agree to the above terms, including the Waiver of Liability.

Signature of Parent the Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_