



Membership Acct. # _____ Exp. Date _____

FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

RANDOLPH YMCA

BIRTHDAY PARTY REGISTRATION FORM



CONTACT INFORMATION

Parent/Guardian Name: _____

Child's name: _____ Sex: M / F (circle one) Age: _____

Home Phone #: _____ Cell Phone #: _____

Address: _____ City: _____ Zip: _____

Email: _____ Would you like to be on our email list? YES NO

BIRTHDAY PARTY INFORMATION

Party Date: _____ Estimated # of Children: _____ Party Time: _____

Circle One: **RANDOLPH YMCA MEMBER** **NON-MEMBER**

PAYMENT INFORMATION

TYPE OF PARTY

Deposit Amount: _____

_____ Gymnasium

CASH

_____ Pool

CHECK: Please make the check payable to the Randolph YMCA and staple your check to this form.

CREDIT CARD: _____
CREDIT CARD # (VISA, MASTERCARD, DISCOVER OR AMEX)

_____ CVV CODE

_____ EXPIRATION DATE

_____ NAME OF CARDHOLDER

What additional services would you be interested in? (Swim lessons, after school, camp, etc)

How did you hear about the Randolph YMCA? _____

"I understand that YMCA activities have inherent risks and I hereby assume all risks and hazards incident to my participation in all YMCA activities. I further waive, release, absolve, indemnify and agree to hold harmless the YMCA, the organizers, volunteers, supervisors, officers, directors, participants, coaches, referees, as well as persons or parents transporting participants to and from activities from any claims or injury sustained during my use of the YMCA property." I also understand the \$ 100 non-refundable deposit policy.

By signing below, I am agreeing to the above statements

Signature: _____

Print Name: _____ Date: _____