BIRTHDAY PARTY REQUEST & WAIVER FORM
COTTONWOOD CREEK FAMILY CENTER YMCA

Parent/Guardian Name __________________________________________________________

☐ Member ☐ Nonmember

Mailing Address ________________________________________________________________

Phone (h) ___________________(w) ___________________ email _______________________

Child’s Name __________________________________________ Child’s Age (they are turning) ___________

Party Date ___________________ Party Time ___________________ Number expected to attend ___________________

Party Location Cottonwood Creek Family Center

Please share how you learned about the YMCA Birthday Parties:

☐ Attended a party at the Y ☐ Friend ☐ Web ☐ Flier, Bulletin Board, etc ☐ Other ______________________

BIRTHDAY PARTY POLICY

• Rental includes the use of party room, pools, and locker rooms for duration of the party only.
• Party participants must adhere to the facility rules, including pool requirements. Children ages six and younger must be within arm’s reach of a parent or caregiver. A parent/caregiver may only supervise two red band children at a time. One of the children must remain in a life jacket at all times.
• Parties must be paid-in-full at time of registration to reserve the YMCA, I understand that $25 is not-refundable, regardless of when the party is cancelled, unless it is cancelled by the YMCA.
• Parties are expected to arrive and depart on time. Parties that go over the allotted time will be charged $10.00 for every 10 minutes.
• Signing this registration does not guarantee the date/time of the party. Each registration must be approved by the Party Coordinator and paid-in-full. Parties are scheduled on a first come, first serve basis.
• A $25.00 fee will be assessed for damages to the party room or facility.
• Party requests must be submitted a minimum of two weeks prior to the party date. A party coordinator will contact you to discuss party details and complete the reservation.

Parent/Guardian signature __________________________________________ Date ______________

PARTY COORDINATOR’S USE ONLY

Decoration Colors (please check two)*

☐ Red ☐ Green ☐ Blue ☐ Yellow
☐ Orange ☐ Purple ☐ Dark Pink ☐ Light Pink
☐ Black ☐ White ☐ Other ______________________

*Based upon Availability

OFFICE USE ONLY:

Party Date & Time Confirmed ______________________________________________________

Total Paid $ ______________________

Date ___________________ Staff initial ___________________ Receipt # ___________________