



TWISTERS SPORTS CENTER
 2639 Terminal Boulevard
 Mountain View, CA 94043
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 twisterssportscenter.com

Kids' Night Out
 Registration and Release
 Part A

Date of Kids' Night Out ___ / ___ / ___

Member Prices

*Call ahead to confirm your Early Bird Reservation!

	Kids' Night Out Participant Name(s)	M/F	Birthday	Early Bird Price*	At the Door Price
Member 1			/ /	\$30	\$35
Sibling 1			/ /	\$27	\$32
Sibling 2			/ /	\$24	\$29

Non-Member Prices

	Kids' Night Out Participant Name(s)	M/F	Birthday	Early Bird Price*	At the Door Price
Guest 1			/ /	\$35	\$40
Sibling 1			/ /	\$32	\$37
Sibling 2			/ /	\$29	\$34

Contact Information (required)

Parent(s) Name _____ Ph _____ Cell _____

Address _____ City _____ Zip _____

email (required) _____

Emergency Contact _____ Relationship _____ Ph _____

Emergency Contact _____ Relationship _____ Ph _____

IT'S A SLEEPOVER!
 (Ages 6+)

Join us for a night of fun! Rock climbing, gymnastics, free play, games, movies, pizza dinner, breakfast and much more! Invite a non-member friend and receive \$10 off combined price! Please bring a sleeping bag and pillow.

Method of Payment _____ Total Due \$ _____

Please Bill Account (applies to "Autopay" members only. Please initial) _____

Cash Amount _____ Check Number _____

Credit Card Visa Mastercard American Express

Card # _____ / _____ / _____ / _____ Exp ____ / ____

Name as it appears on credit card _____

Cardholder Signature _____

See reverse for **Part B**



TWISTERS GYMNASTICS, INC.
Release and waiver of liability, assumption of risk
and indemnity agreement ("Agreement")







Kids' Night Out
Waiver
Part B

In consideration of the Below Named Participants (called the "BNP") participating in any Twisters Gymnastics, Inc. Activity/Event, I and the "BNP" understands the nature of this Activity/Event and that the "BNP" is/are qualified, in good health, and in proper physical condition to participate in such Activity/Event. I and the "BNP" acknowledge that if I or the "BNP" believe Activity/Event conditions are unsafe, "BNP" will immediately discontinue participation in the Activity/Event. I and the "BNP" fully understand that this Activity/Event involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my or the "BNP" actions, or inactions, those of others participating in the Activity/Event, the conditions in which the event takes place, or the negligence of Twisters Gymnastics, Inc., it's respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of the premises (each considered one of the "RELEASEES" herein); and that there may be other risks either not known to myself or the "BNP" or not readily foreseeable at this time. I and "BNP" fully accept and assume all such risks and responsibility for losses, cost and damages, that I or the "BNP" incur as a result of the "BNP" participation in any Activity/Event.

I and "BNP" hereby release, discharge and covenant not to sue and agree to indemnify and save and hold harmless the "Releasees" from all liability, claims, demands, losses, or damages, on my or the "BNP" account caused or alleged to be caused in whole or in part by the negligence of the "Releasees" or otherwise, including negligent rescue operations. I and the "BNP" further agree that if, despite this "Agreement", I, the "BNP" or anyone on my or the "BNP"'s behalf, makes a claim against any of the "Releasees", I will indemnify, save, and hold harmless each of the "Releasees" from any litigation expenses, lawyer fees, loss, liability, claims, damage or cost, which "Releasees" may incur as a result of such claim.

I and the "BNP" have read the "Agreement", understand that I and the "BNP" have given up substantial rights by signing it and have signed freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect. AND I, the minors parent and/ or legal guardian, understand the nature of the above referenced activities and the Minors experience and capabilities and believe the minor to be qualified to participate in such activity. I hereby Release, discharge, covenant not to sue and AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS each of the Releasees from all liability, claims, demands, losses or damages on the minors account caused or alleged to have been caused in whole or in part by the negligence of the Releasees or otherwise, including negligent rescue operations, and further agree that if, despite this release, I, the minor, or anyone on the minors behalf makes a claim against any of the above Releasees, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS each of the Releasees from any litigation expenses, attorney fees, loss liability, damage, or cost any Releasee may incur as the result of any such claim.

Please complete info by all arrows below:

	
Printed Name of Minor Participant 1	Printed Name of Adult Participant
	
Printed Name of Minor Participant 2	Signature of Adult Participant
	 / /
Signature of Parent/Legal Guardian of Above Named Participant(s)	Date

OFFICE USE ONLY
Important: The parent and/or legal guardian signing the release waiver must sign in person OR attach a copy of their drivers license to this form. A copy of the drivers license required to verify that the signatures on both the release waiver and the drivers license match.

Printed name of staff person verifying Parent/Legal Guardian signature: _____