

# BIRTHDAY PARTY GUEST WAIVER



**Child's First Name**

**Child's Last Name**

**Parent/Guardian's First Name**

**Parent/Guardian's Last Name**

**Date of Party**

**Parent/Guardian's Phone Number**

**Parent/Guardian's Email**

I understand and acknowledge that by attending a party or event that the YMCA will not be held liable for any injuries, incidents, accidents, or lost articles in connection with that party or event. I understand that the YMCA may decide to use any party or event as an opportunity to take photos and to create other promotional materials. Therefore, I agree to allow the YMCA to take and use photos of my children and the party or event for promotional purposes. I understand that the YMCA is open to the public and that it contains facilities and equipment that may pose a risk of harm to unsupervised children. I agree it is my responsibility to supervise my children and others invited to attend the party or event in all areas of the YMCA, not just the designated party or event space. Therefore, I agree to waive and release all rights, claims, causes of action, and damages against the St. Cloud Area Family YMCA, their representatives, successors or assigns for any and all injuries, or harm suffered by myself, my children, or any other participants, related to or arising out of participation in or attendance at the party or event. In case of accident or illness, I authorize the YMCA to take any reasonable and necessary measures to secure or provide medical attention to my child if the YMCA is unable to contact me. I understand and agree that all participants under the age of 18 attending the party must have a waiver signed by their legal guardian and that a signed waiver must be returned to a YMCA staff member or submitted online. No persons under the age of 18 shall attend any party or event booking without first submitting this waiver to the YMCA.

By signing this form you acknowledge and accept the terms stated above.

**Parent/Guardian's Signatruue**