TIME TO CELEBRATE!

Birthday Parties at the YMCA

Children age 16 and younger
can celebrate their birthday with us!

Basic Party includes:
- As many as 25 children, $5 each additional child
- Tables and chairs provided*
- Choice in Pool party, Gym party, or playground party

*All other items will be supplied by you.

Three Hour parties are available on request! Email us at
info@athensmcminnymca.org or call us at 423.745.4904
for more information

PRICING	Member	Non–Member
Pool (Two Hour)	$90	$150
Gym (Two Hour)	$75	$100
Outdoor Playground (Two Hour)	$60	$85

For more information or to schedule your birthday
party, email info@athensmcminnymca.org

Athens–McMinn Family YMCA
205 Knoxville Ave. Athens, TN 37303
P 423 745 4904   www.athensmcminnymca.org

Member Name: _____ Party Date: _____

Membership #: _____ Party Time: _____

Party Host(s): _____

THINGS TO REMEMBER

☐ Birthday parties are offered on Fridays, Saturdays and Sundays only.

☐ All parties must provide a non-refundable 50% deposit and a signed agreement within 3 days of registration.

☐ Full payment must be made no later than 10 days prior to the party date.

☐ Cancellations must be made in writing no later than 10 week prior to the party date.

☐ The family is responsible for all food, drinks, cake, decorations and tableware.

☐ The only materials provided in a party are tables and chairs.

☐ Birthday parties are non-refundable

☐ It is your responsibility to meet your guests in the lobby 15 minutes prior to party.

RENTAL AGREEMENT

Initial each line

_____ All guests must sign the YMCA Guest Registration and Release from Liability Form

_____ All guests will follow the YMCA policies, Code of Conduct and obey posted rules.

_____ Payment must be received one week prior to party date. Failure to do so may result in forfeiture of party date and deposit.

_____ Set up begins 20 minutes prior to the party. Clean-up must be complete 15 minutes after the party time ends.

I have read, understand and agree to the above conditions on this party agreement.

Signature _____ Date _____ Staff Initials _____

Code of Conduct Acknowledgement:_____

Staff Use Only

Party Type _____

Number of Children _____ How many over 15? _____ x $5 = _____

Total Party Cost $ _____

Deposit Paid on _____ Staff Initials _____ (Print receipt and attach)

Balance Due $ _____

Balance paid on _____ Staff Initials _____ (Print receipt and attach)