



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# CELEBRATE YOUR DAY WITH US



## YMCA SPLASH BIRTHDAY PARTIES

Our birthday party packages are designed for kids' ages 5 to 12 and up to 25 party guests. Parties are held on Saturdays from 6:30 to 8:30 or Sundays from 7:30 to 9:00 and include 1 hour of exclusive swim time with YMCA certified lifeguards and 1 hour of use of party room and supervised play and a dedicated YMCA staff to facilitate the games (basketball/ beach ball volleyball/ beach ball dodgeball) in our gym.

A special YMCA birthday shirt is provided to the birthday child.

To reserve a date or more information contact:

Tom Mahoney  
845-358-0245 x 111

### ROCKLAND COUNTY YMCA

35 South Broadway  
Nyack, NY 10960  
(845)358 0245

[www.rocklandymca.org](http://www.rocklandymca.org)



# ROCKLAND COUNTY YMCA SPLASH PARTY CONTRACT

Thank you for your interest in a fun YMCA Splash Party. Please submit this completed contract along with full payment to Tom Mahoney / Membership Department. Parties are confirmed when payment is processed.

**Birthday Child's Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **T-shirt Size:** \_\_\_\_\_

**Parent's Name:** \_\_\_\_\_

**Party Date:** \_\_\_\_\_

**Number of Adults:** \_\_\_\_\_ **Number of children:** \_\_\_\_\_ **Age range of children:** \_\_\_\_\_

**Host's Name:** \_\_\_\_\_ **Home Phone #:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_ **Work Phone #:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Fees:** **Members:** \$275 **Member ID:** \_\_\_\_\_

**Non-Members:** \$350

### Rules:

- All guests must abide by the YMCA's Code of Conduct and rules.
  - Party guests should bring their own towel
  - Non-swimmers must be accompanied in the water by an adult
  - Appropriate attire required (bathing suit - no street clothes)
  - no food / beverage in pool area
  - no running / horse play on pool
  - All children 8 and under must have an adult in the water with them.
- Children must be supervised by adults at all times  
Children will be swim tested before they can enter the deep end  
Please no street shoes on pool deck (bring flip flops)  
No spectators on pool deck  
no diving in shallow end  
no breath holding games  
No alcohol/ drugs

**Payment Information:** (circle one) MasterCard Visa American Express Discover

**Name on credit card:** \_\_\_\_\_

**Card Number:** \_\_\_\_\_ **Expiration date:** \_\_\_\_ **CVC code:** \_\_\_\_

I hereby authorize the Rockland County YMCA to charge my credit card for my child's birthday party. Full refunds will be issued if we have at least 2 weeks (14 days) notice of cancellation. A 50% refund will be issued for canceling with less notice

I, have read and understand my responsibilities as host of this party. I will comply with and encourage my guests to comply with all the rules and regulations of the Rockland County YMCA. I agree to assume any risk and hold harmless the YMCA and its staff members from any and all claims, suits, losses, or related causes of action for damages.

In consideration of my child's participation in the activities of the YMCA and its respective officers, employees and members, I hereby agree to hold the YMCA free from any liability. I do hereby for myself, my heirs, executors and administrators, waive all rights and claims for damages which I may have or which herein after accrue to me arising out of or connected to my child's participation in any activities of the Rockland County YMCA.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

<b>Date received:</b> _____	<b>Payment Received:</b> _____	<b>Comments:</b> _____
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