

McCracken's Gymnastics and Swim School

15515 S. Keeler — Olathe, KS 66062 — (913) 782-8555

www.mcgymswim.com

Parents/Kids Night Out

Parents, now is your chance to have a night out, while your kids are having fun in a safe, and structured environment. McCracken's Gymnastics will be offering a program that allows children from the ages of **three and older** to spend the **third Friday of every month** at McCracken's Gymnastics from the hours of **6:30 P.M.-10:30 P.M.**

Children will participate in group games and fitness activities in the gym. The games will be indoors during the winter months. The children will also be involved in a creative arts activity that will allow them to show their artistic talents.

McCracken's Parents/Kids Night Out will be the **third Friday of each month**. To pre-register fill out the form below and return to the office, with payment, **by the third Wednesday** of the month. Late registrations/walk-ins will be accepted on a first come basis at an additional three dollar fee. (Provided there are openings). You may select any month or months you wish; this is not an on-going commitment by you.

- Pre-registered participants- \$17.00. With pizza and a drink \$20.00.
- Late registrations/Walk-ins-\$20.00. With pizza and a drink \$23.00

For more information call us at 782-8555. You'll be glad you did!

Parents Night Out - Registration Form

Last Name Parents

Address

City State Zip

Home Phone Phone at parents evening location

Children Attending

Child 1 Age

Child 2 Age

Child 3 Age

Please check session(s) desired

9 Month _____ Date _____

9 **Check here for Pizza**

Note: Pre-registration no later than
Wednesday of the week you will attend for the lower rate!

Any medical history we may need:

I, the undersigned parent or guardian of the above-name child/children, do hereby grant authority to the staff of McCracken's Gymnastics School, Inc. to render a judgement concerning medical assistance in the event of an accident or illness during my absence. I hold McCracken's Gymnastics School Inc., its teachers, staff and school harmless for all injuries arising to and from all activities.

Signature of Parent or guardian

Date

Office Use Only:

Amount due: _____ Received by: _____