

# Parents Night Out @ North Raleigh Gymnastics

## What is Parents Night Out ?

Parents Night Out is available to members and non-members and is usually offered on the third Friday of every month from 6:30-10:00. This is a fun-filled time starting with a pizza dinner followed by organized gymnastics activities, games, and finishing with open Gym!

## When is it?

2<sup>nd</sup> or 3<sup>rd</sup> Friday of each Month (November, December, and May subjected to availability)

## Who can Come?

Any child between the ages of 5-13

**Limited spaces  
available!**

*Open to members  
and non-members!*

## How Much Does it cost ?

**\$25.00-1<sup>st</sup> child** (until the Wednesday before the scheduled

PNO - \$30.00 if registering Thursday or Friday before PNO)

### **Family Discount:**

\$5 off the second child

\$10 off third and additional children



Pizza and soda will be included.

ALL FEES including the \$5.00 non-refundable deposit are due upon registration. Fees and registration forms **MUST** be submitted to secure your spot.

## PNO Registration Form

Child's Name \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Mother \_\_\_\_\_ Cell \_\_\_\_\_

Father \_\_\_\_\_ Cell \_\_\_\_\_

Home Phone \_\_\_\_\_ Number During Parents Night Out \_\_\_\_\_

Any Food Allergies/Medical Conditions \_\_\_\_\_

Please list the names of any children your child would like to be paired with: \_\_\_\_\_

### **ACKNOWLEDGE OF RISK AND WAIVER OF LIABILITY**

I hereby consent to my child participating in the programs of Gymnastics, Inc. d/b/a North Raleigh Gymnastics (NRG). I understand that injuries can occur and risk is involved in any athletic activity for my child, especially gymnastics activity that involves height and motion.

I further agree that NRG, along with the employees, agents, officers, and directors of NRG shall not be liable for any losses or damages occurring as a result of my child's participation in gymnastics, including transportation to and from activities, except where such loss or damage is the result of the intentional or reckless conduct of one of the organizations or individuals identified above.

This acknowledgment of RISK AND WAIVER OF LIABILITY has been read and is signed voluntarily.

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**North Raleigh Gymnastics 5400 Atlantic Springs Road Raleigh, NC 27616 (919) 790-9400**