

Birthday Party

Join us for your next birthday!

- Martial Arts Class
- Group Games & Sports
- Time for Pizza & Cake
- Fun & Easy

How to Register:

- 1) Contact the location of choice for available date and time
- 2) Complete form and pay deposit
- 3) Send out the invites (we provide)

Springfield

6230-C Rolling Rd.
Springfield, VA 22152

703-644-4889

Fairfax

9415 Main St.
Fairfax, VA 22031

703-425-8425

Burke

9568 Old Keene Mill Rd.
Burke, VA 22015

703-372-5877

Kingstowne

6457 Old Beulah St.
Alexandria, VA 22153

703-971-8560

Registrations

Birthday Party Packages: Package A: \$200 for 18 or fewer guests (6-12 yrs old). All Adults: FREE

Package B: \$250 for 19 or more guests (6-12 yrs old). All Adults: FREE

A \$50 Deposit is required for us to hold your spot. Deposits are non-refundable.

-Your space will be reserved for 90 minutes.

-Each child will receive a martial arts lesson from an instructing staff member.

-You will be responsible for bringing your own decorations, cake, food, and drinks, as well as all necessary utensils and cups.

-Each child will be able to participate in group games and drills managed by a staff member.

-All guests will receive passes good for one free month of instruction courtesy of Elite M.A. Centers.

Structure of the Party:

1. Setting up of the Party & Guests arrival. (10 mins)
2. Taekwondo Lesson (20mins)
3. Group games and drills (30mins)
4. Cake, Ice cream, Presents (20mins)
5. Wrap Up, Guests Departure, Clean-Up.

Responsibility of:

You/EMA Staff
EMA Staff
EMA Staff
You
You/EMA Staff



www.Emacenter.com

Requested Date of Party: Saturday, _____ **Time:** _____ pm (we will provide you with time choices)

To ensure safety, we must have a waiver signed by each of the attendees stating that the children's parents know that they are at the studio participating in the party. We will provide permission slips / invitations to you to pass on to the guests.

Name of Child: _____ Age (for birthday): _____ Parent/Guardian's Name: _____

Address: _____ Home Phone: _____

Work Phone: _____ E-mail Contact: _____

Emergency Contact: _____

Additional Notes:

Elite M.A. Center will provide a qualified instructor and the use of its training facilities for a period not to exceed 90 minutes. Parent/Guardian will provide all additional party supplies and agrees to abide by the rules and regulations of Elite M.A. Center. Parent/Guardian agrees that their signature on this contract constitutes a non-refundable and binding agreement between Elite M.A. Center and the parent/guardian. Furthermore, the parent/guardian agrees to absolve Elite M.A. Center and its employees and representatives from any costs/damages arising from their time in the facility, as well as any injuries/liabilities suffered on these premises. It is understood that the parent/guardian must provide Elite M.A. Center with signed permission slips from all participants. I, as parent or guardian of a student, hereby release, discharge and agree to release Elite M.A. Center, its directors, officers and employees from all liability for damage, injury, or illness to the students or his/her property relating to or deriving from his/her presence at Elite M.A. Center or participation in any Elite M.A. Center sponsored activities. I understand that by allowing my child to attend programs and classes at Elite M.A. Center, I agree to allow the use of photographs or images of my child in appropriate marketing material.

Parent/Guardian Signature: _____ (for school use only) Total Number of Guests at Party: _____ Deposit Amount: _____

Date: _____ Remaining Balance: _____ Paid By: _____

Date: _____ Received By: _____