

Come Party with Us!



Bounce Party Form

Household ID# _____

Today's Date: _____

Parent/Guardian Name: _____

Full Address (including City, State & Zip): _____

Best Contact Phone Number: _____ Email: _____

Requested Party Date: _____ Name of Birthday Child: _____

Age (minimum of 3 years old): _____ Number of Guests (25 max): _____

Bounce Party Slot*: 1st Choice _____ 2nd Choice _____ 3rd Choice _____

*See next page for additional information.

NOTE:

- Birthday Parties in Room 2 are assigned Bounce Session 1 from 9:30 a.m. – 10:25 a.m.
- Birthday Parties in Room 4 are assigned Bounce Session 2 from 12:30 p.m. – 1:25 p.m.
- Birthday Parties in Room 5 are assigned Bounce Session 3 from 1:30 p.m. – 2:25 p.m.

Birthday Party \$200 – Birthday Child + 14 Guests	
Additional Guests _____ x _____ each (up to max 24)	
Total Due	

***CANCELLATION POLICY: All cancellations are subject to a \$50 cancellation fee. ***

The undersigned is aware that there are certain inherent risks involved in participating in Arlington County bounce party including but not limited to the risk of theft or of damage to my property, and the risk of personal injury from participating in athletic activities. In consideration of my being granted permission to participate in these activities and to use the facilities of Arlington County, and/or other activities and services provided by the Arlington County Department of Parks and Recreation, its agents and employees, including food service, I, on behalf of myself, my executors, administrators, heirs, next of kin, and successors, hereby covenant to hold harmless and indemnify the County and all of its officers, departments, agencies, agents and employees from any and all claims, losses, damages, injuries, fines, penalties, and costs (including court costs and attorney's fees), charges liabilities, or exposures, however caused, resulting from or arising out of or in any way connected to my or my family's participation in the above described activity. I have read and understand this HOLD HARMLESS AGREEMENT and by my signature agree to its terms.

Signature: _____ Date: _____



Additional Information for Bounce Parties

Bounce Party Session 1 (Room 2)

- Party room will be available at 9 a.m. for room set-up ONLY.
- No party guests may enter before 10:30 a.m.
- Participants will bounce first then head to party room.
- Bounce time is 9:30 am - 10:25 am
- Bounce room party time is 10:30 am - 11:30 am

Bounce Party Session 2 (Room 4)

- Party room will be available at 12 p.m. for room set-up ONLY.
- No party guest may enter before 12:30 p.m.
- Participants will bounce first then head to party room.
- Bounce time is 12:30 pm - 1:25 pm
- Bounce room party time is 1:30 pm - 2:30 pm

Bounce Party Session 3 (Room 5)

- Party room will be available at 12 p.m. for room set-up ONLY.
- No party guest may enter before 12:30 p.m.
- Participants will start in party room then switch to bounce room.
- Bounce room party time is 12:30 pm - 1:30 pm
- Bounce time is 1:35 pm - 2:25 pm

Additional Information

- Parties are November – March.
- No parties the 1st Saturday of every month.
- No parties are held at Madison on the dates that Open Bounce is scheduled at Lubber Run.
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