



*You're Invited!*

*We're Having a Birthday Bash  
at United Sports*



United Sports  
1426 Marshallton Thorndale Rd.  
Downingtown, PA 19335  
610.466.7100

**UNITEDSPORTS.NET**



*You're Invited!*

*We're Having a Birthday Bash  
at United Sports*



United Sports  
1426 Marshallton Thorndale Rd.  
Downingtown, PA 19335  
610.466.7100

**UNITEDSPORTS.NET**

# You're Invited!

## Join Us & Celebrate

\_\_\_\_\_

[ name ]

Birthday on \_\_\_\_\_

[ date ]



At **UNITED SPORTS** !

1426 Marshallton Thorndale Rd.  
Downingtown, PA 19335  
610.466.7100

Party Activity: \_\_\_\_\_

Activities Begin: \_\_\_\_\_

Activities End: \_\_\_\_\_

RSVP: \_\_\_\_\_

### United Sports Birthday Party Waiver (Please fill out and bring with you day of party.)

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

Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email (Mandatory): \_\_\_\_\_

Child's Name: \_\_\_\_\_

Child's Birth Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AND PARENTAL CONSENT AGREEMENT I hereby release and discharge United Sports Training Center ("USTC"), its agents, employees, staff members, directors, and officers from any claims, responsibilities or liabilities for injuries or harm incurred as a result of my participation and/or my child's participation as a player or spectator in programs and activities, including rockwall activities at United Sports Training Center. I fully understand: (a) these activities involve risks and dangers of serious bodily injury, ("RISKS"); (b) these Risks and dangers may be caused by my own actions or inaction's, the actions or inaction's of others participating in the Activity, the condition in which the Activity takes place, or the negligence of the "RELEASEES" named below; (c) there may be OTHER RISK AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation or that of the minor in the Activity. 2. I authorize USTC, its agents, employees, staff members, directors and officers to take whatever action is necessary, in their best judgment, in an emergency and I hereby release discharge USTC, its agents, employees, staff members, directors and officers from any responsibility or liability related thereto. I hereby grant USTC permission to use my and/or my child's name, picture or likeness in any printed media or any form of advertisement. I fully renounce any and all claims upon USTC for reimbursement for use of this material.

# You're Invited!

## Join Us & Celebrate

\_\_\_\_\_

[ name ]

Birthday on \_\_\_\_\_

[ date ]



At **UNITED SPORTS** !

1426 Marshallton Thorndale Rd.  
Downingtown, PA 19335  
610.466.7100

Party Activity: \_\_\_\_\_

Activities Begin: \_\_\_\_\_

Activities End: \_\_\_\_\_

RSVP: \_\_\_\_\_

### United Sports Birthday Party Waiver (Please fill out and bring with you day of party.)

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

Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email (Mandatory): \_\_\_\_\_

Child's Name: \_\_\_\_\_

Child's Birth Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AND PARENTAL CONSENT AGREEMENT I hereby release and discharge United Sports Training Center ("USTC"), its agents, employees, staff members, directors, and officers from any claims, responsibilities or liabilities for injuries or harm incurred as a result of my participation and/or my child's participation as a player or spectator in programs and activities, including rockwall activities at United Sports Training Center. I fully understand: (a) these activities involve risks and dangers of serious bodily injury, ("RISKS"); (b) these Risks and dangers may be caused by my own actions or inaction's, the actions or inaction's of others participating in the Activity, the condition in which the Activity takes place, or the negligence of the "RELEASEES" named below; (c) there may be OTHER RISK AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation or that of the minor in the Activity. 2. I authorize USTC, its agents, employees, staff members, directors and officers to take whatever action is necessary, in their best judgment, in an emergency and I hereby release discharge USTC, its agents, employees, staff members, directors and officers from any responsibility or liability related thereto. I hereby grant USTC permission to use my and/or my child's name, picture or likeness in any printed media or any form of advertisement. I fully renounce any and all claims upon USTC for reimbursement for use of this material.