

2017 Winter Slumber Party

6pm Saturday, Dec 16 — 8am Sunday, Dec 17

Attendee's Name: _____ School: _____
Address: _____ City: _____
State: _____ Zip: _____ Sex: M or F Birth Year: _____ HA Member: Yes / No
Email: _____ Phone 1: _____ Phone 2: _____
Limitations: _____ Other: _____

If Participant is Under 18 Years Old: *I hereby give permission for my child to participate in this event and have read and signed the HA permission-release-information form (members have already signed this form; non-members MUST complete the full permission-release form). IMPORTANT: HA's permission-release-information form gives instructions for actions to be taken in the event of an emergency and permission to treat if medical attention is needed and the parents cannot be notified.*

Parent/Guardian Signature: _____ Date: _____

\$40 for first child (\$35 for subsequent siblings) CASH or Credit Card ONLY
Deadline: 12/14

Hawaii Academy—Honolulu Gym - *A private school for lifetime fitness, gymnastics & human sciences for all ages and abilities*
1314 Moonui Street, Honolulu www.HawaiiAcademy.com gym +1.808.842.5642

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