



Indoor Inflatable Fun Center

_____ invites _____
to join the fun at Jump Central!

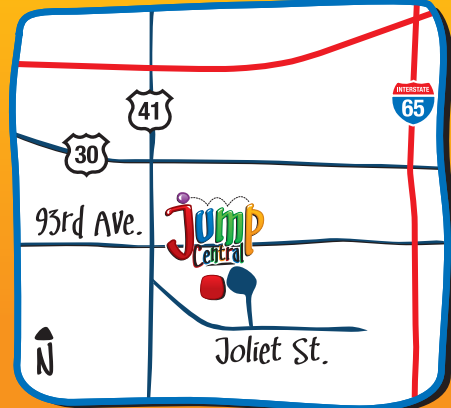
To Celebrate: _____

Date & Time of the event: _____

RSVP By: _____ to _____

*All guests must arrive 15 minutes prior to the scheduled party to review the safety information. Also, each participating child must have a completed and signed waiver before they are able to participate. All participants must wear socks. Waiver forms are available online at: www.jumpcentralparty.com/waiver.pdf

Jump Central
9564 N. Industrial Drive
St. John, IN 46373



www.JumpCentralParty.com
219.565.2010



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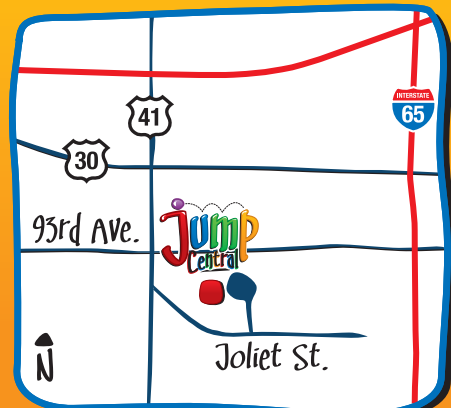
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