

Birthday Party Reservation Form

Child's name: _____

☐ Boy ☐ Girl Age: _____

Parent's name: _____

Address: _____

City: _____

State: _____ Zip: _____

E-mail: _____

Phone: _____

Discount or coupon: ☐ Yes _____

Office use only*

Party Date: _____ Time: _____

Day of week: ☐ Saturday ☐ Sunday

Approx. # of guests: Children _____ Adults _____

Deposit: Cash Check # _____

Credit Card # ☐ _____ ☐ _____

Deposit Amount: \$ _____

Expiration Date: _____ V-Code: _____

Date party booked: _____

Staff processing registration: _____

☐ Member ☐ Non-Member Hostess: ☐ Yes ☐ No

Activity:

☐ Silly Science ☐ Princess/Pirates ☐ Music/Games ☐ Circus

☐ Aloha! ☐ No Activity

ID#

