



Birthday Party Request Form

Party Information Party Date: ___/___/_____ mm/dd/yyyy

Party Time 10:00 a.m. 12:30 p.m. 3:00 p.m. 5:30 p.m.

Birthday Boy/Girl Name _____ Age _____

Approx. Number of children attending _____

Contact Info

Parent/Guardian Name _____

Best number _____ Cell Home

e-mail _____ (Required)

Party Package

Circle one: Basic (\$450+tax/10kids) Premium (\$550+tax/10kids)

Please note: one adult per a child (except birthday child can have up to 2 adults), any additional adults will be \$3.95/person

Approximate additional adults: _____

Deposit info Deposit must be paid in **Cash ONLY**

Circle one: Basic package - \$200 (non-refundable) Premium - \$200 (non-refundable)

I acknowledge that the deposit is non-refundable and serves solely to secure the date and time of the event. The deposit must be paid in **cash only**. The remaining balance **must** be paid in full at least **one week** before the event. Failure to do so may result in the **cancellation** of your reservation, with the deposit being **forfeited**.

Any additional services requested will be billed separately on the day of the event.

Service	Quantity	Price	Total
Party Package			
Extra kid			
Extra adult			
Approximate Total:			