

Birthday Party Request Form

	Contact Information		
Parents Name:			
Home #: ()			
Cell #: ()			
Email address:			
	Party Request Information	DN	(
Child's name:		Date of Birth*:	
School:		Current Grade:	
*Our musical theatre- theme	birthday parties are suitable for	r children ages 8 - 13	
Date of Party			
1 st choice	2 nd choice	3 rd choice	1.2
Preferred Time Period (2hr ma	aximum).		h
	a,.		
# of children attending (include	ding birthday boy/girl):		
[] less than 18 (\$245 +HST	[] 19 – 24 (m	nax.)(\$280 +HST)	
Choice of Theme			
[] Annie	[] Camp Rock	[] Grease	
[] Hairspray	[] High School Musical	[] The Wizard of OZ	
Upon confirmation, a non-refu balance due prior to the comn	•	to reserve the date and time with the	1
Official use only			
Party Date Time	# Staff	Notes	91













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