



Birthday Party Booking Sheet

Cost: \$14 Per Child

Catering - \$7 per child

Lolly Bags - \$2 per child



CUSTOMER INFORMATION

Child/ren's Name: _____ Age of child: _____

Parent's Name: _____

Contact Numbers: _____ (H) _____ (M) _____ (W)

Postal Address: _____

Email Address: _____

PARTY INFORMATION

Party Date: _____ Approx number of kids (min 10): _____ (# of invites _____)

<i>Friday</i>	<i>Saturday</i>	<i>Sunday</i>	<i>Party Area</i>
6:00pm – 8:00pm <input type="checkbox"/>	10:00am-12pm <input type="checkbox"/>	10:00am-12pm <input type="checkbox"/>	Function Room <input type="checkbox"/>
	12:30-2:30pm <input type="checkbox"/>	12:30-2:30pm <input type="checkbox"/>	Lounge Area <input type="checkbox"/>
	3:00-5:00pm <input type="checkbox"/>	3:00-5:00pm <input type="checkbox"/>	Café Area <input type="checkbox"/>

Catering (\$7 extra/child) Yes No TBC Lolly Bags (\$2 extra/child) Yes No TBC

Colour of Invites to be sent: Purple Blue Green

Extra Information: _____

Booking taken by (Name/Date): _____ Information emailed to Party Co-ordinator

ADVISE OF THE NON-REFUNDABLE \$65 DEPOSIT

CREDIT CARD AUTHORISATION

Type: _____ VISA / MASTERCARD (Please circle)

Number: _____ / _____ / _____ / _____ Expires: ____ / ____

Signature _____ Date _____

DEPOSIT PAYMENT (TAKEN IF CUSTOMER HAS NO CREDIT CARD)

Deposit paid: \$ _____ Name/Date: _____ Receipt Number: _____

ADMINISTRATION TO BE COMPLETED BY PARTY CO-ORDINATOR

Invitations Collected: Name/Date: _____

Party Pack Posted: Name/Date: _____

Confirmed Numbers with parents: Name/Date: _____

Confirmed Catering with caterer: Name/Date: _____

Confirmed Coach/s: Name(s): _____

Feedback Form Completed: Name: _____

PAYMENT DETAILS

Final Payment: (_____ x \$14/child) + (Catering _____ x \$7/child) + (Lolly Bags _____ x \$2/child) – Deposit = \$ _____

Receipt Number: _____