



# BIRTHDAY PARTY WORKSHEET

**Birthday Child:** \_\_\_\_\_ **Birth date:** \_\_\_\_\_ Circle one: M / F

**Birthday Parent's Name:** \_\_\_\_\_ **Child's T- Shirt Size:** XS S M L XL

**Phone #:** \_\_\_\_\_ **Email address:** \_\_\_\_\_

**Full Mailing Address:** \_\_\_\_\_

I learned about CSC Birthday Parties from: \_\_\_\_\_

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**Party Site (circle one):** Great Oaks Race St. Malone Cambrianna Santa Clara

**Party Date:** \_\_\_\_\_ **Party Start Time:** \_\_\_\_\_ **End Time:** \_\_\_\_\_

**Estimated number of participants:** \_\_\_\_\_ **Age-range of participants:** \_\_\_\_\_

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<p><b>White Ribbon Party</b> \$250/\$275          1.5 hrs / 2 coaches / up to 20 participants          Includes: Instructors, Tables, Chairs, Party T-shirt</p>	<p><b>Red Ribbon Party</b> \$350/\$375          2 hrs / 2 coaches / up to 20 participants          White PLUS: Extra 30 Minutes Celebration Time,          Table Coverings, Plates, Cups, Napkins,          Plastic Ware &amp; Water Bottles</p>	<p><b>Blue Ribbon Party</b> \$500/\$525          2 hrs / 2 coaches / up to 20 participants          Red PLUS: Pizza, Cake, Juice Boxes or Cups,          &amp; Water Bottles Filled with Favors</p>
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<p><b>Extra...</b></p>	<p><b>Participants (over 20)</b></p> <p>White \$10 per / Red \$15 per / Blue \$25 per          NOTE: extra participant fee includes a 3<sup>rd</sup> instructor          for 25+ total participants*</p>	<p><b>Instructor</b></p> <p>If you'll have fewer than 25 participants          but would like a 3<sup>rd</sup> instructor, the cost is \$100*</p> <p>*must be reserved in advance of your party</p>
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<b>Party Package:</b>	White	Red	Blue	\$ _____
<b>Extra participants:</b>	_____ x	\$ _____		\$ _____
<b>Extra instructor:</b>				\$ _____
		<b>Amount Due</b>		\$ _____

<p><b>Day of Party</b></p> <p><b>Balance Settlement:</b>          (extra participants)          _____ \$ _____</p> <p><b>Paid:</b> \$ _____ (amt &amp; type)          Staff initials: _____</p>
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I, \_\_\_\_\_ (print name), have reviewed the party policies and understand that my payment is NON-REFUNDABLE.

\_\_\_\_\_  
**Parent's Signature** \_\_\_\_\_  
**Date**

Sign-up Date: _____	Completed by CSC employee: _____	_____ Waivers	_____ Invitations
Payment (amt & type): _____	Lead Coach requested: _____	confirmed? _____	
Notes: _____	Assistant Confirmed: _____		