Date ____



(718) 268-0343 Birthday Party Confirmation

Child's Name			Age T	_ Age Turning		
				al Bday <u>/ /</u>		
Address	_					
City/State/Zip	I					
Phone Number:	Home		*			
				RSVP BY		
Email Address				also on invite? *		
(PLEASE CIRCLE	THE * FOR T	HE PREFERRED RS	/P NUMB	ER/EMAIL ON INVITE)		
DATE OF PART	ГУ					
		. G A (w/o gift bags) \$				
(each package includes		GB (with gift bags) \$				
(cach package merades				599 + \$20 each additional		
				·		
		OM for \$50				
		nutes* for \$50				
·		ved in advance and is	-	•		
# of Invitations	requested _	date to be	picked u	ıp		
Menu Pleas		Please ad	e advise us of any food allergies			
Parent will be re			·			
	•	and anything for t	he Adult	'S		
•		, c		e time of booking. The		
•	•			f your reserved date.		
		f guests SEVEN days		·		
		ites prior to the begi I. <mark>Taxes and Gratui</mark>		ne party. Final Payment		
Signature			_ Date			
Office Use Only: †-	shirt size:	age range:	Membe	er Discount 10%		
Acct #	R D	eposit amount: \$		Deposit type:		
		\$ Tax:				