|  |  |
| --- | --- |
| **Parents/Guardian’s Name:** |  |
| **Mobile:** |  |
| **Address:** |  |
| **Email Address:** |  |
| **Child’s Name:** |  |
| **Age Child is Turning:** |  |
| **Number of Participants**$25 per child.(min. total of $250 / 10 children) | **Parents:**  | **Children:**  | **Total:**  |
| **Requested Booking Information:** | **Date:** | **Time:** |
| **Birthday Party Program*** Programs run for approximately 2 hours depending on numbers.
* Party Bags are Included in package.
 | **Party Itineray** **Activity 1**Boomerang Painting **Activity 2** Dreaming Story and Tools**Acivity 3** Boomerang Throwing & Animal Feeding **Activity 4**Party Games   |
| **EXTRAS**  |  **Cadbury Fredo Ice Cream Birthday Cake $20 □****\*NOTE** candles included. |
| **Special Requirments:** (access,allergies,special needs)  |  |

***Office Use Only***

***Final Number of Participants: \_\_\_\_\_\_\_\_\_\_ Client Code \_\_\_\_\_\_\_\_\_\_\_***

***INVOICE NO.: \_\_\_\_\_\_\_\_\_\_\_ INVOICE DATE: ­­\_\_\_\_\_\_\_\_\_\_\_***