



Party Registration Form

Student's name: \_\_\_\_\_ Parent's name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Emergency Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Date: \_\_\_\_\_

Times: \_\_\_\_\_

Food Allergies: \_\_\_\_\_

Party Cost:	\$ ____ . ____
Materials:	\$ ____ . ____
Extra Guests:	\$ ____ . ____
Misc:	\$ ____ . ____
<b>TOTAL:</b>	<b>\$ ____ . ____</b>

Method of Payment

- Check
- Cash
- Visa/MasterCard
- DISCOVER
- American Express

Acct. #:	
Expiration Date:	Security code:

**Subtotal:** \_\_\_\_\_

**Tax: (materials only)** \_\_\_\_\_

**Total:** \_\_\_\_\_

A \$200.00 deposit is needed  
To hold the date.

I give permission for my child to participate in all class activities. I give permission for medical attention in case of emergency.

Signature \_\_\_\_\_

Date \_\_\_\_\_