

Date: _____

Name: _____

Address: _____

Phone #'s: _____ (home)
_____ (cell)

E-mail Address: _____

Child's Name(s): _____

Child's D.O.B.: _____ Child's Age: _____

Party Date: _____ Party Time: _____

of Guests invited: _____ Total Count Due by: _____

Referred by: _____

- Basic Package = \$ 225.00
(Instruction desired? Yes or No)
- Add-a-Guests \$8.00 x _____ = \$ _____
- Themed Cake: = \$ _____
 - Sheet (\$25)
 - Sheet (\$34)
 - Full Sheet (\$47)

 - Yellow
 - White
 - Chocolate
 - Marble



Total Due: = \$ _____

50% Nonrefundable Deposit: = \$ _____

Balance (due 7 days prior to party): = \$ _____

All waivers **must be** signed and returned with payment 7 days prior to the party date.