

Please choose an option:

Print form and mail with check / Submit online form with payment

Total Guests: \_\_\_\_\_

(A group is one birthday child plus guests or different organizations. Fill out new form for each group)

(One chaperone is required for approx. every six children in groups under age 18.)

Guests under 18: \_\_\_\_\_ Chaperones: \_\_\_\_\_ Guests under 2: \_\_\_\_\_ Guests over 18: \_\_\_\_\_ Drivers: \_\_\_\_\_

First Choice Date: \_\_\_\_\_ Time: \_\_\_\_\_ a.m. \_\_\_\_\_ p.m.

Second Choice Date: \_\_\_\_\_ Time: \_\_\_\_\_ a.m. \_\_\_\_\_ p.m.

**\*understand I will receive a phone call to confirm the date.**

Name of Family/ Organization/School: \_\_\_\_\_ Contact

Person: \_\_\_\_\_ Mailing Address:

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone: \_\_\_\_\_

Cell: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Alternate Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Cell: \_\_\_\_\_

Fax: \_\_\_\_\_

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

PROCEED TO PAYMENT CENTER

Field Trip Deposit **\$25.00**

CHOOSE YOUR EVENT FOR PAYMENT

**Birthday Party \$80.00**

Other Event

Payment by credit or debit card can be made through Margery upon confirmation of cost estimate required for each event based on activity/size of group.