

BIRTHDAY & POOL PARTY BOOKING FORM

Name of Child:

Parents name/s:

Address:

Phone Number:

Emergency contact name/numbers:

.....

Any known medical conditions for children participating in the birthday party:

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Any known allergies for children participating in the birthday party:

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.....

How old will the child be turning:

Date of party:

Time of party: ___pm – ___pm OR ___pm – ___pm (time nominated by centre depending on class times)

Number of children attending:

Can all children swim: YES/NO

(Any non-swimmers must have an adult with them in the water, additional to staff provided).

Do any children require floatation devices? YES/NO If Yes, how many?

Do you require the Café to be available for purchases during party i.e. coffee and cold drinks? YES NO

Party numbers must be confirmed not less than 3 days prior to party, food / muffin choice and drink selection must be advised at this time- PREFERABLY IN PERSON. Any additional children who are “extras” on the day will be charged at the full rate as per information sheet. Please bring your copy of this document on the day of the party. Account must be settled prior to start of party.

Reception only: (original for centre - copy for family)

Enrolled at Edge: Yes / No

Amount Due: \$

Deposit Made: \$ (please attach copy receipt) Date:

Receptionist taking booking:.....

Final Balance Paid: Amount \$..... Date: By.....

Method:.....

THIS MUST BE DONE IN DUPLI CATE - ONE COPY FOR FAMILY AND ONE FOR CENTRE