

Birthday Party Application Form



Parent/guardian name:			
Address:			
Postcode:			
Contact telephone number:			
Email address:			
No of children attending:		Child's Name:	
Party date:		Child's Age:	

<u>Party activity</u>	<u>Price</u>	<u>Tick</u>	<u>Time(s)</u>
Swim Mania Including small floats and toys only. Maximum 40 guests.	£54.00 per hour		
'Pirates' Aqua Run This is for swimmers over the age of 8 years. Maximum 30 guests. <i>Please note: participants will be asked to prove their swimming ability before being able to use the Aqua Run.</i>	£84.00 per hour		
Sports Hall Activity 5-a-side Football, Netball, Basketball, Cricket, Rounders or Badminton in half of the Sports Hall. Maximum 40 guests.	£32.40per hour		
Sports Hall Giant Slide Party Giant inflatable slide and disco music in half the Sports Hall. Maximum 40 guests.	£91.20 2 hours		
Additional half of Sports Hall (as an addition to Sports Hall parties) Including balls, goals etc.	£12.00 1 hour		
Community Wing Party Room Includes disco music. Maximum 40 guests.	£32.40 per hour		
Community Wing Bouncy Castle Party – Under 8's only Includes disco music. Maximum 40 guests.	£72.00 2 hours		
Roller Skating Party in Sports Hall With disco music and skates for 30 children. £3.00 per extra child.	£96.00 2 hours		
Face Painter Maximum 20 faces per hour.	£30 1 hour		
	£48 2 hours		
<p style="text-align: center;"><u>Pool Party – Rules & Regulations</u></p> <p>I have been given the rules and regulations relating to the hire of the pool at Castle View Community and Fitness Centre. I understand and agree that only 1 spectator will be allowed on poolside during parties and agree to adhere to the Under 8's and Changing Room's policies.</p> <p>Signed _____ Dated _____</p>	<p style="text-align: center;"><u>Liability For Damages And Vandalism</u></p> <p>It has been explained that I, as party leader, am responsible for any damages or vandalism to the centre and understand that I will be invoiced should my party cause any damages. I have received a copy of the liability and damage rules.</p> <p>Signed _____ Dated _____</p>		

For Office Use Only

	Amount	Signed	Date	Receipt No
Deposit Received:				
Outstanding Balance:				
Outstanding Balance:				

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Contact Log for payment

Date / Time	Action	Attendant Name

Additional Notes

Date / Time	Notes	Attendant Name