

# BIRTHDAY PARTY FORM

The Tumble Tot Co. 1-1166 Gorham Street, Newmarket, ON L3Y 8W4  
 Tel: 905-836-6401 Fax: 905-953-9216 [www.tumbletot.com](http://www.tumbletot.com)

**Date of Party:** \_\_\_\_\_ **Current Customer**  Y  N

**Saturday**  1:00-2:45 (hr Gym & 45 mins Party Room)  3:15-5:00 (1 hr Gym & 45 mins Party Room)

**Sunday**  12:30-2:15 (hr Gym & 45 mins Party Room)  2:45-4:30 (1 hr Gym & 45 mins Party Room)

**Parent's full name:** \_\_\_\_\_

**Child's name:** \_\_\_\_\_ **Gender** M  F

**Phone Number:** \_\_\_\_\_

**Approximate age of children:** \_\_\_\_\_

**Approximate number of children:** \_\_\_\_\_

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*OFFICE USE ONLY / FINAL CONFIRMATION*

**Age of Children:** \_\_\_\_\_ **No. of Children:** \_\_\_\_\_

**Today's Date:** \_\_\_\_\_ **Coaches Initial:** \_\_\_\_\_

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**COMMENTS:** \_\_\_\_\_

**HOW DID YOU HEAR ABOUT OUR BIRTHDAY PARTY? (Please specify)**

WEBSITE  ERA BANNER  PARKS&REC  MONTH AHEAD  GOT MY KIDS GUIDE  OTHER

**\*a \$100.00 deposit is required at time of booking (non-refundable)**

We, the contractors of The Tumble Tot Co. for Birthday party on (date)..... hereby agree to release and waive any right to take an action against the club and/or any contracted coach or employee or member of the club for any reason whatsoever, save and except a matter which is insured by the Club specifically. In such instance of insurance, any claim by the parties leasing the facility and/or persons to assist in the party described above, is subrogated to the insurer of the club only.

\_\_\_\_\_ **Please initial that you have received the BIRTHDAY PARTY ATTENDANCE FORM and agree to return it with the balance due (cheques only) a min. of ONE WEEK prior to your party.**

\_\_\_\_\_ **Please initial that you are aware there will be additional charges for parties running over time allotted. Please arrive no more than 10 minutes prior to your party.**

\_\_\_\_\_ **Date**                      **Signature of participant parent or legal guardian if under 18 years of age**

OFFICE ONLY						
DEPOSIT		DATE		CHQ#		INITIAL
Cost+GST-Deposit		DATE		CHQ#		INITIAL
COACHES						