

Chesterfield Family YMCA BIRTHDAY PARTY REQUEST FORM



Requested Date of Party: _____

Requested Time of Party: (Please check one)

Friday 7:00 – 9:00pm **Saturday 3:00 – 5:00pm** **Sunday 3:00 – 5:00pm**

Child's Name: _____ Date of Birth: _____

Contact Person: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ E-mail Address: _____

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| <p><input type="checkbox"/> Bronze Party Package For up to 15 kids <input type="checkbox"/> YMCA Members: \$100 <input type="checkbox"/> Non Members: \$125</p> <p><input type="checkbox"/> *Gold Party Package For up to 24 kids <input type="checkbox"/> YMCA Members: \$200 <input type="checkbox"/> Non Members: \$250</p> | <p><input type="checkbox"/> Silver Party Package For up to 15 kids <input type="checkbox"/> YMCA Members: \$150 <input type="checkbox"/> Non Members: \$175</p> <p><input type="checkbox"/> *Platinum Party Package For up to 24 kids <input type="checkbox"/> YMCA Members: \$250 <input type="checkbox"/> Non Members: \$295</p> |
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***For Gold and Platinum Party Packages ONLY:**

***Theme: (Please check one)**

Princess Hawaiian Sports Tea Party
 Carnival Pirates Western 2 colors: _____ / _____

Custom theme: (additional \$30) _____

***Cupcakes: (Please check one)**

White Chocolate Combination (15 of each)

***Frosting**

Buttercream Whipped (White Only)

Frosting color(s): (may pick up to 3) _____

YMCA CANCELLATION POLICY

- Parties include a \$50 non-refundable cancellation fee.
- All parties must be cancelled with a 2 week written notice. Those cancelled less than 2 weeks before the party will only be eligible for a 50% refund.
- If you wish to reschedule your party, we require 3 weeks written notice and there will be an additional \$15 rescheduling fee.
- If the YMCA cancels, we will reschedule or refund 100%.

My signature below verifies that I am requesting the above party package, I have read and understand the cancellation policy, and I am aware that payment is due in full upon confirmation of my party date to hold my reservation.

Signature of Responsible Party _____ Date _____