Birthday Party Request Form

Please fill out this form to request a birthday party event at the North Museum of Nature and Science. We will do our best to accommodate your needs. We will contact you to confirm your visit, for further details, or to notify you about any potential conflicts.

Today's Date:		Form Received:	
Contact Person:		Email:	
Name of Birthday Gues	t:	Age of Birthday Guest: _	Gender: FD MD
The contact person mu	st inform the North Muse	eum of any changes as soon as po	ossible.
Address:			Zip Code:
Phone:	Cell:	Contact's Fax Num	lber:
Date Requested:	Second Choice fo	or date:	
Setup Time:	_ Tear Down Time:		
Type of Rental (check	one):		
□ Private Birthday Part Maximum of 50 guests;		ll-day admission to Museum for	party guests
□ Themed Birthday Pa Maximum of 50 guests; or demonstrations for p	1.5 hours in Kinsey room	n; All-day admission to Museum a	nd customized activities
Themed Party Options Astronomy Paleontology Zoology Science (Geology, Pressure) 		:her:	
Description of Desired	Event and Birthday Gue	est Preferences:	
	ests: Children #: , lult for every five children	Age range of children attending:)	/ Adult #:
Are you interested in re	a caterer/food available? serving our SciDome The security deposit is required t		* -
Please mail this form t North Museum of Natu Attn: Birthday Reservati 400 College Avenue Lancaster, PA 17603 Or fax the form to 717-3 Or e-mail to: birthdayso	re and Science ons 358-4504	m	Orth USEUM