



Party Booking Form

Date of party: _____ Day: _____ Start time: _____ Finish: _____
 Number in party: _____

Child Details

Surname: _____ Forename: _____ Age on Birthday: _____ Boy/Girl: _____

For joint birthday parties, add the details of the second child below.

Surname: _____ Forename: _____ Age on Birthday: _____ Boy/Girl: _____

Organiser Details

Surname: _____ Forename: _____ Mr/Mrs/Miss/Ms/Other: _____

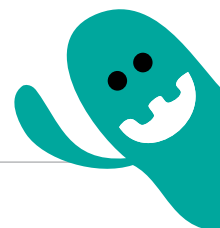
Address: _____

Post Code: _____

Tel: _____ Mobile: _____ Email: _____

Party Options (All parties have a minimum of 10 children. For more information see our Party Options). **Number of guests:** (Including the birthday child) _____

<input type="checkbox"/> Discovery Sweet pods Cold buffet	<input type="checkbox"/> Bronze Sweet pods Cold buffet	<input type="checkbox"/> Silver Sweet pods Hot buffet	Party Extra's <input type="checkbox"/> Cup of slush (99p each) <input type="checkbox"/> Face painting (£1.25 per child) <input type="checkbox"/> Balloon on a stick (50p per child) <input type="checkbox"/> Sweet pods (£1 each) <input type="checkbox"/> Buffet (p.o.a) <input type="checkbox"/> Magician/Entertainer (p.o.a) <input type="checkbox"/> Hot food for a Discovery party (£1.00 per child) <input type="checkbox"/> Adult food platter (serves 5. £14.00) <input type="checkbox"/> Adult snack platter (serves 4. £9.95) <input type="checkbox"/> DJ (p.o.a)
<input type="checkbox"/> Gold Sweet pods <input type="checkbox"/> Hot buffet <input type="checkbox"/> Cold buffet		Choose one of the following: <input type="checkbox"/> Crafts <input type="checkbox"/> Games <input type="checkbox"/> Biscuit decorating	



Dietary Requirements:

Vegetarian food required: _____ Any food allergies: _____

Adult food/snack platters: _____ Ground floor area required: _____ Party room (Staff): _____

Please make sure all party guests are dressed for safe fun, socks must be worn at all times. Please ensure the centre is informed of any food allergies or special requirements prior to the party, thank you.

Payment Details

Total Party Cost: £ _____ (50% non-refundable deposit)

Deposit: £ _____ Date: _____ Method: _____ Taken by: _____

Balance: £ _____ Date: _____ Method: _____ Taken by: _____

The balance payment for a booked party must be settled 7 days prior to the party. Final payments can be made by cash or credit/debit card (card payments can be made by calling 01255 430895). We do not accept cheques.

I agree that as the party organiser I am responsible for all party guests, that my party will abide by the rules of play whilst in Space Kingdom and I have received and read a copy of the party terms and conditions.

Signed: _____ Organiser date: _____

Booking taken by: _____ of Space Kingdom on: _____



Notes

