

Katonah **ART** Center

ART PARTY CONTRACT

Last Name: _____ First Name: _____ Party Date: ___/___/___

Scheduled start time: _____ Scheduled end time: _____

Phone #: _____

Mailing Address: _____

Email: _____

We appreciate your choice for the Katonah Art Center for your birthday party celebration. Our goal is to provide a fun, creative and memorable day for your child. To help ensure the best possible experience we ask you to adhere to the following:

1. Please arrive at least 15-20 minutes before your party is scheduled to allow time for set up.
2. KAC must be given an exact head count for the party (including parents and siblings) at least one week prior to the party date. If additional guests (including siblings) attend, KAC will do our best to accommodate them however we cannot guarantee sufficient project supplies or party assistants. Please inform us if you expect parents to remain during the party so we can plan accordingly. The base rate for all parties (10 children or less) is \$300, an additional rate will be charged per additional student.
3. A \$100 non-refundable deposit must be paid upon booking your party. A credit card number must be given to cover the remainder of the party (you may choose to pay by cash or check however a credit card number must be on file to reserve your party). Your deposit will ensure the day and time specified above. KAC reserves the right to change the instructor, studios or assistants.
4. The remaining balance of your birthday party must be paid-in-full the Monday following your party. If the balance is not received in person, your credit card will be charged that Monday.
5. Your party is scheduled for 1 ½ hours depending on the party time and age. If you require more time an additional fee of \$50 per half hour will be charged.
6. All food ordered through KAC, as well as additional services (invitations, decorating etc.) must be paid for along with the party balance.
7. Please review your party details at the top of this page. By signing this agreement, you are acknowledging that you have read and understood all terms of this agreement.

Please call the Katonah Art Center (914) 232-4843 with any concerns or questions regarding your event. We thank you in advance for your cooperation in these matters. Once again, we value your business and patronage, and look forward to seeing you soon.

I have read, understand and agree to the above terms.

Signed: _____ Date: _____

Deposit of:

\$100.00 Paid on ___/___/___ Payment Type: cash/check/charge

To ensure party reservations, a credit card must be given.

Credit Card Type: _____ (no AMEX) Number: _____ Exp: ___/___ security code _____

Please return this contract ASAP. If this contract is not signed and returned before arrival, you will be asked to sign it upon check-in. You can also email it to office@katonahartcenter.com.

