

Stonestown Family YMCA Birthday Party Request Form

Please complete this form to request a birthday party at the Stonestown Family YMCA. Please note that this for is not a confirmation of a party. You receive a confirmation at least one week after your request is sent in.

	PERSONAL INFO	RMATION	
First and Last Name of Child:		DOB:	
Parent First and Last Name:			
Home Phone & Cell Phone:			
Address:			
Email Address:			

CHOOSE AN ACTIVITY				
ARTS AND CRAFTS	POOL	GROUP GAMES	SPORTS IN THE GYM	
1- 10 kids \$ 200	1- 10 kids \$ 230	1- 10 kids \$ 200	1- 10 kids \$ 200	
11-15 kids \$ 230	11-20 kids \$ 280	11-15 kids \$ 230	11-15 kids \$ 230	
16-20 kids \$ 280	21-30 kids \$ 360	16-20 kids \$ 280	16-20 kids \$ 280	
21-30 kids \$ 360		21-30 kids \$ 360	21-30 kids \$360`	
		BASE PRICE		

CHOOSE A DATE				
ARTS AND CRAFTS	POOL (only at 2:15 to 4:15)	GROUP GAMES	SPORTS IN THE GYM	
1st Choice: Sunday,		1st Choice: Sunday, 12/2/12	1st Choice: Sunday,	
11:30 to 1:30	1st Choice: Sunday,	11:30 to 1:30	11:30 to 1:30	
2:15 to 4:15	2:15 to 4:15	2:15 to 4:15	2:15 to 4:15	
2nd Choice: Sunday,	2nd Choice: Sunday,	2nd Choice: Sunday,	2nd Choice: Sunday,	
11:30 to 1:30	2:15 to 4:15	11:30 to 1:30	11:30 to 1:30	
2:15 to 4:15	3rd Choice: Sunday,	2:15 to 4:15	2:15 to 4:15	
3rd Choice: Sunday,	2:15 to 4:15	3rd Choice: Sunday,	3rd Choice: Sunday,	
11:30 to 1:30		11:30 to 1:30	11:30 to 1:30	
2:15 to 4:15		2:15 to 4:15	2:15 to 4:15	



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OTHER INFORMATION		
COLORS OF PARTY:		
SPECIAL REQUESTS:		
MEDICAL NEEDS (if any):		
AGE RANGE OF KIDS:		
# OF ADULTS ATTENDING		

Please email this form back to Dianne Lotivio, Senior and Family Programs Coordinator at dlotivio@ymcasf.org or fax to 415.213.8363 attn: Dianne Lotivio. You will receive a confirmation form within a week of your receipt. For further questions, please call 415 242 7117.