

BEADING PARTY REGISTRATION FORM



Birthday Child's Information:

Name: _____ Age: _____

Party Information:

Date: _____ Time: _____

Location: _____

Desired Time of Beading Activity: _____

How many children are attending: _____

What are the numbers, sex, & age of each child attending:

Parent/Guardian Information:

Name: _____

Phone Number: _____

E-mail address: _____

Your beading activity for up to 10 children will cost \$150.00 at KIDZLAND or \$175.00 in your home. Parties with more than 10 children will be charged an additional \$15.00 per child.

Full payment must be made at the time of booking.

Payments may be made at KIDZLAND by cheque or credit card, in-person or over the phone. Only Cancellations 4 weeks prior to the date of the party are entitled to a \$75.00 refund.

I have read, understand, and am willing to abide by Little Heart Beats Studio Policy:

Signature: _____