



Birthday Party Contract

Child's Name: _____

Child's Date of Birth: _____

Party Location: _____

Party Date: _____

(Please check with Katherine for availability prior to filling in).

Number of Children expected: _____

Age range: _____

A final count will be required 72 hours prior to party (this is to ensure we have enough props, crafts, mats etc...)

Parent(s) Full Names: _____

Parent(s) Address: _____

Parent(s) Phone #: _____

Parent(s) Cell Phone: _____

Parent(s) Email Address: _____

A little insight on whom this special day is for...

Child's Favorite Color: _____

Child's Favorite Activities:

Will you be incorporating any other theme other than yoga:

Siblings that will be attending the party & ages:

Are there any health conditions we should know about concerning your child:

Anything else you would like to tell us about your child:

Party Package Desired: _____ Price: _____

Location fee of \$75 if the Party is held at our studio: _____

*****If selecting package #1 please choose craft:**

- Talking stick craft _____
(included in pkg #1 pricing)
- No sew lavender eye pillows _____
(adt'l \$5/chld - replaces talking stick)
- Calming Jars* _____
(adt'l \$5/chld - replaces talking stick)

*recommended for older children 6+

By signing below you agree to the above prices and party package selected as well as the following terms and conditions: A \$50 *****non refundable**** deposit is due in order to secure your party date.

No changes can be made to the party package & selections any later than 5 days prior to the party date.

Parents provide: ALL decorations and food. (If held at our studio it is a *****dessert only**** party. Cupcakes are recommended, as food is served picnic style).

Please note: Parents prior to the party will be asked to sign a participation waiver.

Print full name

Signature

Date

Print full name

Signature

Date