

Birthday Party Package



432 Frances Street Molalla, Oregon 97038

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Name: _____ Total package fee: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Guest of Honor: _____ Guests Age: _____

Date Requested: _____ Time Requested: _____ Additional hour: **YES NO**

Theme: Tea Party-Surfs Up-Mermaid- Pirate-Sports-Dinosaurs Package: _____ Number of Guests: _____

Available Times: (Times may not be available all days due to aquatic center programs. Additional Hour \$30/\$35).

Friday: 7:00pm to 8:00pm

Saturday: 12:30pm to 1:30pm 3:00pm to 4:00pm 6:00pm to 7:00pm

Sunday: 1:30pm to 2:30pm 3:30pm to 4:30pm

Package A

- Themed Decorations
- Photo backdrop & Props
- Plates, Napkins & Utensils
- 2 Lg Pizzas (3 for 13-24 & 4 for 25-36 guests)
- Additional Pizza \$18.00
- Capri Sun

Package B

- Themed Decorations
- Photo backdrop & Props
- Plates, Napkins & Utensils
- Cupcakes
- Vanilla Ice Cream Cups

Package C

- Themed Decorations
- Photo backdrop & Props
- Plates, Napkins & Utensils
- 2 Lg Pizzas (3 for 13-24 & 4 for 25-26 guests)
- Additional Pizza \$18.00
- Capri Sun
- Vanilla Ice Cream Cups

In District prices:

<u>0-12 Guests</u>	<u>\$215.00</u>	<u>\$200.00</u>	<u>\$240.00</u>
<u>13-24 Guests</u>	<u>\$260.00</u>	<u>\$280.00</u>	<u>\$300.00</u>
<u>25-36 Guests</u>	<u>\$330.00</u>	<u>\$360.00</u>	<u>\$420.00</u>

Out of District prices:

<u>0-12 Guests</u>	<u>\$225.00</u>	<u>\$220.00</u>	<u>\$260.00</u>
<u>13-24 Guests</u>	<u>\$280.00</u>	<u>\$300.00</u>	<u>\$320.00</u>
<u>25-36 Guests</u>	<u>\$350.00</u>	<u>\$380.00</u>	<u>\$440.00</u>

*All Party Packages include Party Room rental and pool admission for the attendees. If this package is in addition to a Private Facility Rental there will be a discount of 20% off this package. If package immediately precedes Inflatable Swim on Saturdays, admission to swim will be an additional \$5 in-district/\$6 out-district per swimmer.

Packages are available for larger groups see Front Desk Staff for details*

Cupcakes provided by Las Delicias Bakery. Pizza provided by Domino's Pizza

***Please see backside of form for more details & ordering options ***

Cupcake and Pizza Options

Pizza Options:

Pepperoni: ___ Cheese: ___

Hawaiian: ___ Sausage: ___

Cupcake Flavor:

Vanilla Red Velvet

Strawberry Chocolate

Frosting:

Butter Cream Vanilla

Whipped Cream

Additional Cupcakes:

12 cupcakes = \$25.00

24 cupcakes = \$50.00

Please initial the following:

_____ I understand that all rules and policies of the Molalla Aquatic Center will be enforced during my rental.

_____ I agree to the lifejacket policy. Anyone in a lifejacket must be accompanied by an adult 15 & older in the pool.

_____ I understand that I am liable for any damages that occur as a direct result of myself or any of my guests.

_____ I understand that I will be charged for any damages that occur during my rental at the Molalla Aquatic Center.

_____ I understand that my rental is for the designated time only and I will be charged if I exceed the rental time.

_____ I understand that the \$50.00 deposit is due at time of booking my event.

_____ I understand that the \$50.00 deposit is NON-Refundable if I cancel my event within 72 hours of the event DATE.

_____ I understand that Party Packages require a 5-business day cancellation. If I cancel after the cupcakes have been ordered, I will forfeit my deposit and the cost of the cupcakes.

_____ I understand that Payment is due in full 5-business days prior to the event starting.

_____ I understand that Cupcake orders must be made 2 weeks prior to my event.

_____ I understand that I will be charged a 4% fee to use my credit or debit card at the time of payment or deposits.

Participating in Recreation Programs sponsored by The Molalla Aquatic District, I hereby acknowledge that I understand that there are risks of accidents resulting in bodily harm to me and/or my children arising out of those activities. I understand that Recreation Activities are planned with safety of participants in mind. I further acknowledge that I and/or my children have the physical capacity reasonably necessary to engage in the Recreation Activity for which I have enrolled. I also acknowledge that I take full responsibility for my behavior and the behavior of my child and will conduct myself and direct my child to conduct herself/himself in a safe, responsible, and respectable manner. In case of emergency, accident, or illness, I give my permission for myself and/or my child to be treated by a professional medical person and admitted to a hospital if necessary. I agree to be the party responsible for all medical expenses which are incurred in my and/or my child's behalf. It is agreed that the District, its Boards, employees, volunteers, and agents shall be held harmless against all claims, damages, loss or expenses including attorney's fees arising out of or resulting from my or my child's participation in Recreation Programs. I agree pictures taken during activities may be used for future promotions without compensation.

Renter Signature: _____

Date: _____

Staff: _____

Date: _____

Total Fee: _____

Deposit of \$50.00: **Yes No**

Payment Method: _____

Remaining Fee: _____

Payment Date: _____

Payment Method: _____

Staff: _____

Date Received: _____

In Fusion: **Yes No**

Master Calendar: **Yes No**

In When to Work? **Yes No**

*Deposit holds place on calendar. Deposit in **NON-REFUNDABLE** if cancelation is 72 hours or less of party