PRIVATE EVENT ORDER FORM

1 Mills Cir 503, Ontario, CA 91764 909-360-5159 - www.theride7d.com



We are Thrilled you are considering creating such a unique party/event with us. Please fill out and drop off or email (drew@theride7d.com) this form to THE RIDE 7D when you are ready to book your time and date. It's important to book soon as our private party spaces fill up fast.

		CONTACT INFOR	MATION			
٨	lame:	Company	/ Name:			
Phone: Cell:						
			ity/Stato/7in:			
_			ity/State/Zip:			
EVENT INFORMATION						
Ν	lame of E	ne of Event:				
D	ate of Event: Time of Event:					
		ow many hours: Number of People:				
Н	low did yo	ou hear about us?				
		PRICING/PACKAGES	AVAILABLE			
	Initials	Services Available	Details	Pricing	Purchased	
		Monday – Thursday Unlimited Rides for 8 – 45 guests	Store closed to public	\$250 per/hour	\$	
		Fri/Sat/Sun + Holidays Unlimited Rides for 8 – 45 guests	Store closed to public	\$450 per/hour	\$	
		Cleaning Fee	Covers trash removal, cleaning floors - Mandatory	\$25	\$25	
		Rentals - (2) Six-Foot Banquet Tables (We only have 2)	Tablecloths NOT included	\$10	\$	
		Rentals – (8) Folding Chairs (We only have 8)	Standard chairs	\$10	\$	
		Paparazzi Photo Package Level I	Unlimited Digital email photo souvenirs	\$25	\$	
		Paparazzi Photo Package Level II	Up to 36 (4"x6") high gloss photo prints w/plastic sleeves	\$50	\$	
		Ride Crew Tip	You will have a dedicated host for you event	\$Appreciated	\$	
			,	TOTAL	\$	
		Please initial next to the packages you are interested in above. Simulator seats 8 guests per ride - 7 different rides to choose from in our ride				
	library - Mu	ist be paid in full prior to your event to guarantee availability! See st	_	egs. No refunds onl	y store credit.	
		CREDIT CARD INFO	RIMATION			
٨	lame on C	Credit Card:				
C	Credit Card	d #:	Billing Zip Code f	or Card:		
Ε	xpiration	Date: 3-4 Digit CVV on b	oack of Card:			
Te	erms and cor	nditions: I authorize THE RiDE 7D to charge my credit card above for the full a egardless of the number of guests that attend and that the store will be close	mount of this private party. I under		o refunds or	
Α	uthorizat	ion Signature:	Date Signed:			
		<u>Internal Use O</u>	<u>niy:</u>			

completed form? Paid/Full? Scheduled/Calendar? Call 24 ahead?