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| --- | --- | --- | --- |
| Event: |  | Cost Per Hour: |  |
| Booked By (LE Leader): |  | Number of Hours (Minimum 2): |  |
| Date/Time: |  | Optional Class:($25 fee to book) |  |
| Number of Goody Bags: (Custom or Prepackaged choices) |  | Type of Class Requested: |  |
| Number of Adults/Children: |  | Additional Costs or Requests: |  |
| Contact Name and Phone Number: | | | |

|  |  |
| --- | --- |
| Birthday child Name and age: | Additional Contact Person:  Email Address:  Additional Contact Phone Number: |

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| Party Needs and Description:Guest may choose to provide all party items themselves or may ask to be provided with party planning assistance as needed. |
| Party Theme:Cake:Catering:Décor:Additional Notes: |

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| --- | --- | --- | --- |
| Deposit Amount:  Paid By: | $\_\_\_\_\_.\_\_\_\_\_ | Date Taken: | \_\_\_\_/\_\_\_\_/\_\_\_\_ |
| Estimated Party Balance ($6.95 per child minus birthday child) | $\_\_\_\_\_.\_\_\_\_\_ | Estimated Additional Planning Balance: | $\_\_\_\_\_\_.\_\_\_\_\_ |
| Total Amount Due Day of Event: | $\_\_\_\_.\_\_\_\_\_\_ | Date/Time: | \_\_\_\_/\_\_\_\_/\_\_\_\_ |