BIRTHDAY PARTY INTEREST FORM

Lareen Fender THE BALLET SCHOOL PERFORMING ARTS
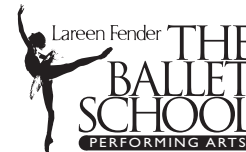
Name of Child: _____

Birthday? _____   Age they are turning? _____

Parent name: _____

Phone number: _____   E-mail:_____

Party request date(s) (Saturday and Sunday ONLY)

_____

Package: SILVER_____   GOLD _____   PLATINUM _____

Party theme: BALLET ____   CREATIVE DANCE _____

                    BROADWAY DANCE (Gold and Platinum ONLY) ____   ACTING (Platinum ONLY)____

Number of guests who will participate in the class (Number based on package option requirement): _____

Number of observing guests (adults or older siblings etc): _____

Currently a student at The Ballet School? Y / N

If Yes what level or class currently in? _____

Do you want a character appearance (additional fee)? Y / N

If Yes what character(s)? _____

FOUR Activities they LOVE the most in their class at TBS:

1)_____

2)_____

3)_____

4)_____

Favorite movie/characters/music?

_____

_____

Any special requests?

_____

_____

PLEASE NOTE: A $100 deposit is due at the time of party bookings. The remainder of fees are due on day of party BEFORE party begins. On day of party, please arrive 15 minutes before allotted time to make payment, check in with teachers, prepare lobby area, and help greet guests. The class portion of the party will aim to begin promptly at the start of the allotted time frame. During the party the participating guests and ONE adult are allowed in the studio. The adult may take pictures during this time. All other adults and guests may stay in lobby area and watch through viewing windows. At the end of the class, there will be time in the space for reception (snacks, cake presents etc. provided by host family) A Ballet School staff member will be present, primarily for supervision, not to facilitate any activity. Clean up will be provided by staff members. Any over time will be an additional cost. of $20 per 30 minutes.

I understand and agree to the above.

Signature:_____ Date: _____

OFFICE USE ONLY

Date form turned in: _____ Package option: _____

Agreed upon date and time: _____

Total Fee: _____   Additional costs: _____

Paid full fee: _____ (date)   Deposit: $100   Paid deposit: _____ (date)