SUN COUNTRY OUTDOOR BIRTHDAY PARTY CONTRACT

Select Party Day: □ Friday □ Saturday □ Sunday □ Other (based on availability)		We Supply: • Party Invitations	
Date of Party: Time: # Children (est.): Ages of Children:		Birthday T-shirt for Birthday ChildBirthday Medal for Birthday Child	
Instructor Requested (not guaranteed):		Mylar Balloon for Birthday ChildHelium Balloons for decorations	
Select Party Type:			
☐ 1-Hour Party: Playground Area Only - \$150		Each Guest Will Receive:	
☐ 1-Hour Party: Pool Area Only - \$225		 Sun Country Logo Cup with 	
☐ 1.5-Hour Party: 1-Hour Pool, 30-Minutes Playground - \$325		One Goody Item	
Contact Information:		Party Details:	
Child's Full Name:	M/F	 Prices are based on 10 guests 	
Birthday Child Current Sun Country: ☐ Member ☐ Non-Member		 Birthday Child(1) is FREE 	
Membership Expiration Date:		• \$18.00 for each additional guest	
Birthdate:/ Age at Birthday:		 Sun Country Members receive 	
Parent's Full Name:		10% off party rates	
Phone: ()			
Email Address:			

Party/Protocol Information:

- Every person at your party must fill out our online waiver. Please email them a link prior to the party. Waiver may only be filled out by parent/guardian.
- DEPOSIT IS NON-REFUNDABLE BUT IS TRANSFERABLE IF DONE UP TO 7 DAYS PRIOR TO THE PARTY DATE. BALANCE IS DUE THE DAY OF THE PARTY.
- Be on the lookout for a letter from our party director after booking your party which outlines our new protocols to send to your guests.

OFFICE USE ONLY:			
Parent Requests:		Date of Deposit : Total Deposit Paid : \$	
		🗅 Cash 🕒 Credit Card 🗅 Autopay / EF	
Confirmation Date: Estimated Number of Children Attendic Employee Initials:		Base Party Cost : \$	
Celebration Squad instructions:		(-) Member Discount (10%) : \$ (-) Coupon / Gift Certificate : \$ (=) Total : \$	
Reminder (please check box after aski	ng):	(+) Tax : \$	
☐ Please arrive 15 minutes before party		(=) Total : \$	
 Please dress accordingly for party (i All party guests must have a current Do we have waiver from birthday c 	waiver on file hild?	(-) Deposit Amount Paid : \$ (=) TOTAL DUE : \$	
Please review all current COVID-19	orotocols	(Optional) Total Tip: \$ Total Amount Paid: \$	
Sun Country staff working party:		□ Cash □ Credit Card □ Autopay / EF	
Program 1:			
Program 2:			