



Birthday Party Request Form

Vandalia Recreation Center

Office Use Only
 Staff Initial: _____
 Date/Time Received: _____

1st Choice Party Date: _____ 2nd Choice Party Date: _____

- | | | |
|-----------------------------------|--|--|
| | <u>Special Events Room</u> (plain room) | <u>Ricky's Room</u> (daycare oriented room) |
| <input type="checkbox"/> Friday | <input type="checkbox"/> 5:30 pm-6:30 pm
<input type="checkbox"/> 7:00 pm-8:00 pm | <input type="checkbox"/> 5:30 pm-6:30 pm
<input type="checkbox"/> 7:00 pm-8:00 pm |
| <input type="checkbox"/> Saturday | <input type="checkbox"/> 11:00 am-12:00pm
<input type="checkbox"/> 12:30 pm-1:30 pm
<input type="checkbox"/> 2:00 pm-3:00 pm
<input type="checkbox"/> 3:30 pm-4:30 pm
<input type="checkbox"/> 5:00 pm-6:00 pm | <input type="checkbox"/> 11:30am-12:30pm
<input type="checkbox"/> 1:00 pm-2:00 pm
<input type="checkbox"/> 2:30 pm-3:30 pm
<input type="checkbox"/> 4:00 pm-5:00 pm
<input type="checkbox"/> 5:30 pm-6:30 pm |
| <input type="checkbox"/> Sunday | <input type="checkbox"/> 1:00 pm-2:00 pm
<input type="checkbox"/> 2:30 pm-3:30 pm
<input type="checkbox"/> 4:00 pm-5:00 pm | <input type="checkbox"/> 1:30 pm-2:30 pm
<input type="checkbox"/> 3:00 pm-4:00 pm
<input type="checkbox"/> 4:30 pm-5:30 pm |

* These time listed above are for 1 hour in the party room of your choice, followed by 2 hours in the feature of your choice

Child's Name _____ Ages of children _____

Contact Person _____

Address _____
 Street City State Zip Code

Home Phone () _____ Work Phone () _____

Preferred Contact Number () _____

EMAIL: _____

Member of the Vandalia Recreation Center: Yes No

Activity (2 hours) Aquatic Center Climbing Wall Luther's Jungle

I have read and agree to the terms of the Birthday Party Reservation and understand that payment will be due ten (10) business days before the scheduled party date:

Name _____ Signature _____ Date _____

Office Use Only

Date Contacted _____ Payment Due By _____
 Resident/Member Non-Resident Charge for the party \$ _____
 Payment Received _____ Additional Comments _____