

Party Agreement

Kelley's Fine Arts
P.O. Box 14138
Florence, SC 29504



1. Name of Birthday Child _____ Age on Birthday _____
2. Parent's Name _____
3. Home Address _____
City/State _____ Zip _____
4. Daytime Phone No. _____ Evening Phone No. _____
5. Date of Party _____ Day _____ Time _____
6. Email address _____

1.5 Hour Gymnastics Party is \$160.00, includes 1hr of gym time and 30 min of party time.

If there are more than 15 children, there will be an additional \$5.00 charge per child.

You may add an extra 30 min of play time for \$40.00. We will provide plates, napkins and tablecloths.

The birthday child will receive a T-shirt

7. T-shirt Size (**please circle one**) child xs child sm child md child lg child xlg
8. How many guests are expected _____ Ages of children attending _____
9. Table cloth color (**please circle one**) white blue red pink purple
10. Plates color (**please circle one**) blue red pink yellow lime green purple

There is a \$50.00 deposit due when this agreement is turned in. This deposit is refundable up to 1 week prior to the scheduled party.

Deposit (\$50) cash _____ check _____ date paid _____

Party \$160

Extra children _____ x \$5 = _____ Extra 30 min _____

Party Total _____ -\$50 deposit _____ Cash _____ Check _____

Parent's Signature

Received By

Party dates and times must be discussed with and confirmed by Miss Tiffany at kfagyteacher@yahoo.com before turning in the application.

No party will be confirmed without a completed application and the \$50 deposit