



PARTY BOOKING FORM

ORGANISERS DETAILS

First Name _____ Last Name _____

Address _____

Mobile _____ Email _____

PARTY PERSON

Name _____ Boy/Girl _____ Date of Birth _____

GUESTS

Number Of Children _____ Approx. Ages of Children _____

Expected Number of Adults _____

PARTY DETAILS (Circle preferred time and room)

Date _____ Preferred Time 10:00am 12:00pm 2:00pm

Preferred Party Room **Mega Market Toy Shop** Science Lab

Preferred Decoration Colour Scheme _____

EXTRAS

Balloons Jelly Cups Party Bags

PARENT FOOD PLATTERS (Please indicate quantity)

Wedges Platter ____ Dip Selection Platter ____ Sandwich Platter ____ Fruit Platter ____

Hot Food Platter ____ Juice Jug ____

SPECIAL REQUIREMENTS/INFORMATION

Email – info@planetkidsplaycentre.com Phone – 0426261685