



Birthday Party Request Form

Today's Date: _____ Time: _____

First Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Requested Party Date and Time: _____ Time Slot: 11am 2pm 5pm

*Standard Party Time is an average of 3 hours. Party Room time will be before or after movie depending on how schedule falls.

Requested Movie: _____

Number of Kids (including BDay Kid): _____

*Party Room will seat 18 Kids Comfortably leaving Standing Room for adults

Package Options (CIRCLE ONE):

- | | | | |
|----|---------------------|----|---------------------|
| #1 | Movie Tickets | #2 | Movie Tickets |
| | Popcorn/Candy/Drink | | Popcorn/Candy/Drink |
| | Café Kid's Meals | | Ice Cream Sundaes |

Number of Seats to be reserved for party kids, parents, siblings and anyone else: _____

*Parties may choose to pay for other children's parent's seats or have the other parents pay for their own tickets. We will block off the number of seats requested (max 30), any parent wishing to sit with the kids needs to be included in this count, and any not included will be responsible for finding their own seat.

Policies

*Due to the nature of our industry, your requested movie and start time may differ. Movie bookings and schedules are determined the Monday prior to your party, and may cause movie or time changes up to 60 minutes. This may cause the timeline or duration of your party to change. Your final movie choice and start time will be confirmed the Monday prior to your event, and we cannot guarantee movie availability.

***Showtimes will be available Monday evening prior to your party (exceptions for Holidays)**

*Minimum charge of \$150 (10packages x \$15) applies to all parties. \$15 for each package over 10

*\$25 Deposit will be due one-week prior to event

*We can't promise that requested times will be matched exactly, but we will do our best.

*Parents sitting with the party in the blocked section of seats will be required to pay the regular general admission rate (not the reserved seating rate, if applicable).

*No outside food or drinks (except cakes/cupcakes and goody bags to be handed out upon leaving)

Signature _____ Date: _____

Deposit: \$25 Paid on: ____/____/____ MGR Initials: _____ Parent Initials: _____