

Birthday party – Enquiry form

Name	
Address	
Email	
Hand-phone	
House Telephone	
Are you an existing Centre Stage parent?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please indicate your child's class (day and time)	
Preferred Date of Party	
Time of Party <i>(rooms are provided for a maximum of 4 hours per party)</i>	
Birthday child's name	
Age of Birthday child	
Number of Children attending (Max of 20)	
Birthday Party Package	
Birthday Party Theme	
Location of Birthday Party	<input type="checkbox"/> Woking Road <input type="checkbox"/> East Coast <input type="checkbox"/> Other Location If outside venue, please confirm address <input type="checkbox"/> Same as billing address above Other address: