

Party Registration

Call to Confirm Event Date Before Submitting Form!

Person Responsible for Payment: _____
Address: _____ City: _____ State: _____ Zip: _____
Home Phone: _____ Work Phone: _____ Cell: _____
E-mail: _____
How you found out about Artistic Gatherings / Who recommended us: _____

Party Description: _____

Party Date: _____ Day of the Week: _____ Time: _____
Birthday Person: _____ Age Turning: _____ School Currently Attending: _____
Requested Balloon Colors: _____
Chosen Art Project (see back): _____
Favorite Interests & Hobbies (special requests for party decor, etc.): _____

Payment Must Be Attached with Registration (*No refunds unless event canceled by Artistic Gatherings. Event date can not be reserved without at least 50% deposit.*)

How Many People? _____ ⇒ Must be the maximum number of people (including birthday person) for whom we should prepare art projects, goodie bags, invitations, etc. **Since the studio will need to prepare and buy supplies for this number, this is the number of people you will pay for regardless of actual attendance.**

Minimum Event Amount \$195 + (_____ People x \$15 each = \$ _____) = Total \$ _____

5% No Food/Drink Discount if Applicable (minus) \$ _____

Other Fees if Applicable \$ _____ Description: _____ / **TOTAL Amount Due** \$ _____

DEPOSIT Attached \$ _____ Date Paid: _____ Check # _____ Visa MC Debit Cash

BALANCE Due \$ _____ Date Paid: _____ Check # _____ Visa MC Debit Cash

Card# _____ - _____ - _____ - _____

Expires: ____ / ____ 3-digit # on back of card: ____

Billing Address (if different than above): _____

Exact Name on Card: _____ Signature: _____

I hereby hold Artistic Gatherings, Inc. and any of its employees, agents and associates harmless in the unlikely event of my, my child's, or any other adult's and/or child's injury on or about the studio's premises, and I have read and agree to all of the terms described on the front and back of this form. If I am registering for a children's event, I acknowledge that I am responsible for providing adult supervision (at least 2 adults) for this event, and that those adults are solely responsible for the health and safety of the children while attending the event. I understand that there are no refunds for invited guests who do not show up, regardless of circumstance.

Printed Name: _____ Signature: _____ Date: _____