

Birthday Parties at the Geneva Rec Complex

****INDOOR TURF RENTAL****

DATES AND TIMES OF AVAILABILITY

(Mid-April – Early September)

Contact Anne or Janelle at 789-5005 to check for open rental times on the TURF!

INFORMATION ON YOUR NEXT PRIVATE PARTY!

PRIVATE PARTY PACKAGE INCLUDES (\$110 per 1hr. usage)

- 1 hr. of reserved time on our turf
- Use of tables and chairs inside the warming room area
- Tables will be decorated with table cloth and balloons
- Access to play your favorite music
- Admission for 15 children into the complex (Additional children \$5.00 each)
- Set up for soccer, kickball or other pre-approved activities (ie relay races, tag games)

PRIVATE PARTY PACKAGE PLUS (\$55)

- Includes all of the above items, PLUS
- Sheet of pizza (approx. 28 squares)
- 2 cups of soda/slushies for each child (no substitutions) and paper products



REGISTERING FOR YOUR PARTY:

Must make reservations and deposit at least 5 days prior to party date.

For reservations to be official, a non-refundable deposit of \$50 is required.

Remainder of the balance is due upon arrival on the party date (cash or checks only)

The GRD reserves the right to cancel any party for a superseding event or inclement weather, if the GRD cancels the party, the deposit will be refunded.

REGISTRATION FORM

Regular Party Package (\$110.00 per hour) _____ Add Package Plus (\$65.00) _____

Date Requested: _____ Time Requested: _____

Guardians Name Responsible: _____ Relation _____

Address _____ City _____ Email _____

Home Phone _____ Cell Phone _____

Child's Name _____ Child's Age _____ Child's Favorite Colors _____

Party Package Plus Info: Cake Flavor: (circle one) vanilla - chocolate - swirl

Cake Frosting: (circle one) vanilla - chocolate

Pizza: (circle one) cheese - pepperoni

Please Read and Sign the Following:

I, _____ hereby release the city of Geneva and it's supervisors from full responsibility in case of accident, damage, loss or liability which may arise because of my own or my child's participation in this program. I understand that should this activity result in injury, it is my obligation to use my own resources in treatment of this injury.

Signature _____ Date _____

OFFICE USE ONLY: Date Deposit Recvd _____ Recvd By _____ Amt. Recvd _____ Check/Cash _____