



Birthday Party Contract

Name of Birthday Star: _____ Age on Birthday: ____ M/F

Parent Name: _____ Cell Number: _____

Street: _____ City & Zip: _____

Email: _____ KIM Member? No / Yes

Date of Party _____ Saturday / Sunday Time of Party: 12:30pm to 2:30pm

3:30pm to 5:30pm

6:30pm to 8:30pm

Cost of Party: 1 \$275.00 for up to 20 children

_____ \$18.00 per child after 20

_____ \$3.00 per additional board (optional for other than birthday child)

Total of Additional Costs: \$ _____

Grand Total: \$ _____

Non-refundable retainer fee required to guarantee the date: \$100.00 paid? No / Yes, paid on ___/___/___

Balance Due: \$ _____ **Cash or Credit Card only. Sorry, no checks**

I, _____, authorize the charge of \$ _____ for the above to Kick's In Motion, Inc.

VISA /MC /AMEX # _____ Exp Date ___ / ___ CVVC # _____

Card Holder : _____

Billing Address: _____

City/Zip _____

Authorized Signature X _____

Kick's In Motion, Inc.