

## Birthday Party Request Form



Date Requesting \_\_\_\_\_

Theme Requesting \_\_\_\_\_ (Examples include mermaids, unicorns, Bluey, Taylor Swift, Paw Patrol)

Contact: Julie @ 207-253-1700 or [briodancestudio@gmail.com](mailto:briodancestudio@gmail.com)

After confirming the date and time with Julie, please return the completed form with payment in full (cash or check only) to Community Services. A confirmation will be emailed to you after we reconfirm dates and times with Brio Dance Studio and CE Facilities Department.

Party includes one hour of organized dance activities followed by one hour party.

Fee: \$200.00 (15 max participants) Additional participants \$ 3 each. (Non-residents, please add an additional 10% to the total cost).

Location: Cape Elizabeth Community Center

Birthday Child's Name \_\_\_\_\_ Age \_\_\_\_\_

No. Children Expected \_\_\_\_\_ Age Range \_\_\_\_\_ Mostly boys/girls or all boys/girls? \_\_\_\_\_

Dance Party Start Time \_\_\_\_\_ Party/Refreshment Start Time \_\_\_\_\_

Parent/guardian over age 21 responsible for appropriate activity, supervision, adherence to all policies, and facility security:

Name \_\_\_\_\_ Cell # \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

As The Renter/User, I Understand And Agree To Comply With All Facility Rules And Agree To Pay Any Costs Incurred Due To Incident Of Use.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please return the completed form and check payable to  
CECS to 343 Ocean House Rd., Cape Elizabeth, ME 04107.

Total Paid \$ \_\_\_\_\_ Cash/Check No. \_\_\_\_\_ Date Received \_\_\_\_\_