

BIRTHDAY REGISTRATION FORM

Print Client N	ame:						
Phone Numb	er:			E	-mail:		
Child's Name							
Date of Party	:/	/	Date of	Birth:	/	/	Number of SKATERS:
			Plea	se Circle	the App	ropriat	te Party Time
FRIDAY: 9:00-10:30PM							SATURDAY: 1:00-2:30PM
	SUNDAY	: 1:00-2	2:30PM	SUNE	DAY: 6:	30-8:(SATURDAY: 8:30-10:00PM 00PM
	Ba	isic Party	Package:	\$200 for	up to 8 g	guests	(\$18.95 each additional guest)
		A	20% Servic	e Charge	e is incluc	led wit	th all Birthday Parties.
ŗ	lce Ska Number of i		ctor: Yes		_	* Ava	11+ skaters you need another coach ilable for afternoon parties only. ½ hour
				-			STRATION
If you cand	el the part	y after th		has beer		u may	apply the credit to reschedule a party or will only
*AL	L DATES	AND TIM	<mark>ES ARE S</mark>	UBJECT	TO CHA		BASED ON FUTURE ARENA BOOKINGS.
PK Hockey Ho and their resp from and aga including but	oldings LLC, pective Succ inst all liabi not limited for myself,	and Hoff cessors o lity (statu to, attor or as leg	mann Ever r Assigns, c itory or oth ney's fees al guardiar	blades H lirectors, nerwise) and disb n for a ch	loldings L , officers claims, s ursemen hild, pare	LC, and and en uits, de ts) aris	Florida Everblades LLC, Everblades Food Service LLC, d their respective parent and affiliated companies nployees as now or hereafter may be constituted emands, judgements, costs, interest and expense sing from any injury or death. I assume all other person, so identified for any bodily injury that
PAYMENT TYI	PE: VISA	A	MEX	Mast	erCard		Discover
CREDIT CARD #: Exp. Date:							Exp. Date:
			<mark>*MUST HA</mark>	VE A <u>SIG</u>	INED COM	NTRAC ⁻	<u>T TO BOOK A PARTY</u>
PRINT NAME	:						
SIGNATURE:							DATE:

Contact: 239-948-7825 X1204 or recreationbirthday@floridaeverblades.com