

# Provide the following Information

**Parent/Guardian Name:**

**Contact Cell:**

**Email:**

**Party Date:**

**Pick Session:** Sat. 2- 5  
Sat 7-10  
Sun 1-4

**Child Name:**

**Boy or Girl**

**Age:**

**Number of skaters:**

**Color Scheme/ Theme (Pick 2 colors):**

**Party Pays for Extra Skaters (siblings & parents) YES or NO**

- **If you marked NO, please include a list of the guests that you are paying for**

**Credit Card Number and Expiration Date:**

\*We do not accept American Express

\*You may come in on the weekends during our skate session to pay your deposit

\*Request a phone call to give your credit card information (Calls made **only** on weekends during our skate sessions)

❖ **Your deposit will be taken off of your party balance**

- Ex. Party of 12= \$150, \$25 deposit= \$125  
Party of 25= \$275, \$50 deposit=\$225

**Email this information to: [Watercityparty@gmail.com](mailto:Watercityparty@gmail.com)**

**\*Request a phone call to give your information or you can come in during our open skate to drop off your form**