

First Baptist Grapevine CLC Party Request Form

Family Name _____

Primary Contact _____

Address _____

City _____, Texas Zip _____

Home Phone _____

Cell Phone _____

E-Mail _____

It's my Party... _____ I'll be _____

Desired Date: 1st Choice _____ 2nd Choice _____

Time: 10:00-12:00 _____ 1:00-3:00 _____

Area(s) requested:

_____ Game Room _____

_____ Gym _____

Number of People Expected:

_____ Children _____ Adults (1 adult to 5 children is required)

Equipment needs: _____

Tables and Chairs are available for your use.

Party sponsor is responsible for clean up.

**ALL CHILDREN SIX (6) YEARS AND YOUNGER MUST BE ACCOMPANIED TO THE RESTROOM
BY AN ADULT.**

Name Signature Date