



**BIRTHDAY PARTY APPLICATION
(Guilford Residents Only)**

Name of Applicant _____ Date: _____

Child's Name _____

Address _____, Guilford, CT 06437

Phone Number (H) _____ (C) _____ Email _____

Date request: (1st choice) _____ (2nd choice) _____ (3rd choice) _____

Hours Requested: From _____ to _____ Setup Selection (See Back): _____

Check one: Guilford/Whitfield Room (Large Activity) _____ Sachem Room (Preschool) _____

Children's Birthday Party - Fee: 2 hours 1-25 children \$150 _____

Teen or Family Birthday Party - Fee: 3 hours - \$250 (75 person maximum) (8:1 ratio teen/adult)

Number of Children Expected: # _____ Average Age of Children Attending: _____

Birthday Theme/Activities _____

*If applicant hires caterer, applicant must provide through the caterer, a Certification of Liability Insurance naming the Town of Guilford as additional insured with a 30 day cancellation notice at least 2 weeks prior to the date requested and approved.

*If applicant hires entertainment, applicant must provide through that entertainment group, a Certification of Liability Insurance naming the Town of Guilford as additional insured with a 30 day cancellation notice at least 2 weeks prior to the date requested and approved.

Terms: Reservations may not be made more than 3 months in advance of application. Rooms are reserved on a first come first serve basis with the department. No phone reservations accepted. Payment must be made at the time the application is submitted. Please read birthday party rules on the back of this application and sign.

Payment: Applications will only be accepted with full payment. Please make all checks payable to: Guilford Parks and Recreation Department. Confirmation will be mailed at the time of approval. Request for refund will be accepted with 2 weeks notice only and a \$50 processing fee will be assessed.

In consideration for use of the Nathanael B. Greene Community Center, I certify that the information provided is accurate and I understand that the Parks and Recreation Department reserves the right to transfer room reservation in case of conflicts. I accept full responsibility for the conduct of the group and any damage to equipment or the facility.

Signature of Applicant

Date

