



Party Reservation Form

1st Date Choice: _____ *2nd Date Choice:* _____

Time Choice: M, T, W, R, F 6:00 pm – 7:30 pm Saturday 2:00 pm – 3:30 pm; 5:00 pm – 6:30 pm

Parent or Guardian Information

Name: _____

Address: _____

Phone: _____ *Email:* _____

Child Information

Name: _____ *Age:* _____

Party Information

Party Package Choice: Enchanted Garden Tea Party or Spa Retreat

Number of Guests: _____

Cake Flavor: _____ *Cake Colors:* _____

Additional Comments
