



Birthday Request Form

Applicant Information

Parent Name: _____

Member Status: Yes No If yes, please provide member number: _____

Phone: _____ Email: _____

Child Name: _____ Child Age: _____

Basic Event Information

Event Date: _____

Birthday Package: Solar (1 hour) | Supernova (2 hours) Galactic (2 hours) Big Bang (2 hours)

Event Time: 11am-12pm 11am-1pm 1pm-2pm 3pm-5pm 4pm-5pm

Location: Default Party Room (inside) Theater (inside) Amphitheater (outside)

Event Details

Theme: Yes No

If yes, select one: Space Explorers Under the Sea Kablam! Chemistry Diggin Dinos

Science Adventure (Included in Galactic and Big Bang; \$150 additional charge): Yes No

If yes, select one: Marine Touch Tank Liquid Nitrogen Demo Shark Tooth Lab Planetarium

Cake Flavor (For Big Bang Only): Chocolate Vanilla Chocolate/Vanilla Combo No Cake

Will you be using any outside vendors? Yes No

If yes, please list vendors (type and name): _____

For Office Use Only

Approved by

Date