Birthday Party Guest List

Please complete and return this form ***7 DAYS PRIOR*** to the commencement of your party as this information is **essential** for catering and staffing purposes.

Birthday Child:_____
Age:___Party Date and Time:_____

Child's Name	Age	Child's Name	Age

Please note: Extra children not included on the guest list must be paid for at casual entry rates and catering if applicable. Thank you Management.

Please return 7 days prior by the most convenient method below:

FAX NUMBER: 98426469 **EMAIL**:headoffice@playdays.com.au

POST: 350 Blackburn Rd, East Doncaster 3109