

# SPECIAL EVENT REQUEST

Today's Date: \_\_\_\_\_ CGC Person Booking Party: \_\_\_\_\_

Type of Event \_\_\_\_\_

Gymnastics Party \_\_\_\_\_ Parkour Party \_\_\_\_\_

Child's Name \_\_\_\_\_

\_\_\_\_\_ Girl \_\_\_\_\_ Boy \_\_\_\_\_ Age \_\_\_\_\_ # Kids

Date of Party \_\_\_\_\_ Time \_\_\_\_\_

Saturday	4:00 - 6:00p	5:00 - 7:00
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Extra Time Needed? \_\_\_\_\_ Extra Pizza Needed? \_\_\_\_\_

Person Requesting Party \_\_\_\_\_

Member \_\_\_\_\_ Non Member \_\_\_\_\_

Email \_\_\_\_\_ Phone # \_\_\_\_\_

ADMIN COMPLETES REST OF FORM:

Dollar Amount of Party: \_\_\_\_\_

Payment	\$100 Deposit	Balance Paid
Cash		
Check		
Debit/Credit		
On-Line		

CGC Party Hosts \_\_\_\_\_

Person In Charge          Coach          Coach

Notes: \_\_\_\_\_  
\_\_\_\_\_