

Confirmation Letter Sent with Receipt

Deposit Paid

Date:

Date:

Hastings Family Aquatic Center 901 Maple Street, Hastings, MN 55033 651-480-2385



Birthday Party Reservation Application

		•					
Email or Mail Form & \$50.00 Deposit To: Hastings Parks & Recreation ATTN: HFAC Birthday Party 920 W. 10th Street, Hastings, MN 55033			Tfaustini @hasti			Email Form To: austini@hastingsmn.gov lestions? 651-480-6179	
Birthday Guest of H	onor Name:						
Group Contact Nam	ne:						
Mailing Address:							
City, State, Zip:							
Phone: (Work)	(C	(Cell)		(Email)			
Guest of Honor F	avorite Color:		Age:				
Guest of Honor Gender: M F			Cake Flav	or:Chocolate	e Vanilla	Marble	
	Please list any						
Party Package (Circle One):		0	Option A (\$150.00)		Option B (\$100.00)		
Party Details	etails Party Date		Arrival Time		uld like cake/ice Option A)	Total # of Lunches (Option A)	
Payment Informate The Hastin Lunch @ \$4.00/each	gs Family Aquatic Cent	•	A, MasterCard,	Discover, and Cas	h NO PERSONA	AL CHECKS	
Deposit Due Now (\$50.00 due with application)			\$50.00 Or		tion A Only!		
Option A - Add'l guest over 10 @ \$15/ea			\$				
Option B - Add'l guest over 10 @ \$9/ea			\$				
Total Minus Deposit (due upon arrival)			\$		3.12% non-refundable card fee		
Type of Payment (circle one) Cash			/ Visa / MasterCard / Discover		r The City of I	The City of Hastings does NOT issue invoices	
Name on Card (ple	ase print)						
Card #			Exp Date:		CVV Co	CVV Code:	
Signature:			Today's Date:				
Participa							
further agree to indemnify an		Family Aquatic Ce	enter, Aquatic Facili	ty Manager, and staff	f harmless from and a	mentioned activity(ies) and I gainst all liability for any injury in this activity.	
Signature:			Printed Name:				
		BELOW F	OR OFFICE U	JSE ONLY			
Write Reservation Date		Pri	nt Your Name:				

Print Your Name:

Print Your Name: