

KID'S EXTRAVAGANZA REGISTRATION FORM

FEBRUARY 12, 2016 5:30PM-11:00PM FOR AGES 3-12 YEARS OLD

CHILD'S NAME: _____ AGE: ____ SHIRT SIZE: _____

ALLERGIES:	
GUARDIAN'S NAME:	
CONTACT NUMBER: _	
RESERVATION NUMB	ER:
<u>SCHEDULE</u>	
5:30PM-6:00PM	DROP OFF/ GAMES (VALHALLA)
6:00PM-6:30PM	PIZZA PARTY (VALHALLA)
6:30PM-9:00PM	WATERPARK/ ARCADE
9:00PM-9:30PM	CHANGE/ ICE CREAM SUNDAE MADNESS
9:30PM-11:00PM	MOVIE
DINNER FROM 6:00PI SUPERVISION. I UNDE	DR MY CHILD/ CHILDREN TO PARTICIPATE IN THE NESES KIDS EXTRAVAGANZA M-6:30PM AND THEN TO BE ON THEIR OWN AND RELEASED FROM YOUR RSTAND THAT THE STAFF IS NOT RESPONSIBLE FOR MY CHILD/ CHILDREN AFTER I ALSO UNDERSTAND THEY ARE NOT RESPOBSIBLE FOR THEIR BELONGINGS.
CHILD/ CHILDREN'S N	AME(S):
GUARDIAN'S NAME:	
ELECTRONICS AT THIS	O HAVE YOUR CHILD'S BELONGINGS IN A BAG LABELED. WE ALSO SUGGEST NO EVENT. WE WOULD ALSO GREATLY APPRECTIATE IF ALL CHILDREN COULD BE ATERPARK AT TIME OF DROP OFF. REGISTRATION IS DUE FEBRUARY 8, 2016 TO KRESORT.COM.
GUARDIAN'S NAME:	DATE: