



The City of Coral Gables

War Memorial Youth Center
405 University Drive
Coral Gables, FL 33134

Tel: 305-460-5600, Fax: 305-460-5631

Youth Center Party Reservation Form

Basic Package _____

Gymnastics Package _____

G R B

Date of Party (Saturdays ONLY): _____ Time: 11a.m.- 3p.m.

Child's Name: _____ Child's Age: _____ Parent's Name: _____

Address: _____ City: _____

E-mail: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

<p>Basic Party Package Includes picnic tables and chairs for up to 50 guests, access to covered ball pit area, access to outdoor playground and use of pavilion and patio from 11am to 3pm.</p> <p>Cost: \$263 Deposit: \$50 (<i>refundable</i>)</p> <p><i>Initials:</i> _____</p>	<p>Gymnastics Party Package Includes picnic tables and chairs for up to 50 guests, access to covered ball pit area, access to outdoor playground and use of pavilion and patio from 11am to 3pm. Private GymKIDZ party time for group (up to 15 kids).</p> <p>Cost: \$441 (<i>GymKIDZ- \$231, YC- \$210</i>) Deposit: \$50 (<i>refundable</i>) Add'l kids: \$11.00 ea.</p> <p style="text-align: center;">Gym Time A. 12:45-1:45pm B. 1:45-2:45pm</p> <p><i>Initials:</i> _____</p>	PARTY PACKAGE	
		DEPOSIT	\$50.00
		OUTSIDE VENDOR FEE*	
		ADDT'L TABLE/CHAIR	
		ADDT'L CHILDREN	
		YC TOTAL	
		GYMKIDZ TOTAL	

Please read and initial prior to each rule listed below:

_____ The facility must be cleaned and returned to its original condition promptly by 3pm. All facility rules and regulations must be followed. Garbage must be disposed of and tables wiped down. Area will be inspected before departure and if damages are found or if the area has not been cleaned the deposit will not be returned. The \$50 security deposit will be returned through the mail in the form of a check assuming all rental conditions are met.

_____ PROHIBITED items include: tobacco products, glass, alcohol, confetti, piñatas and sidewalk chalk.

_____ For all cancellations a refund request form must be completed and submitted 2 weeks prior to the party date to receive full refund; \$15 processing fee will apply.

_____ Renters must supply vendor insurance along with a \$50 fee for all outside vendors.

_____ No shows will not be granted any refunds.

_____ There are **NO** indoor facilities available for inclement weather.

_____ ALL GUESTS attending the party must show a valid state issued ID to be cleared through the Fast Pass system before entering the facility.

I HAVE READ AND UNDERSTAND ALL RULES AND REGULATIONS

Renters Signature: _____ Date: _____

-----OFFICE USE ONLY-----

Date Booked: _____ Total Amount Paid: _____ Staff Initials: _____