

Birthday Party Request Form

Childs name: _____

Party date: _____

School: _____

Age _____ Grade _____ Teacher _____

Treat choice, please circle one:

- Ice Cream Cups - Vanilla or Chocolate \$20
- Rice Crispy Treats \$20
- Cookies \$10

This includes one treat, placemat, and crayons for each child. A hat and sticker for the birthday child plus the Birthday poster set up in the cafeteria for the day!

Payment must be received in the cafeteria when the order is placed (2 weeks prior to party date) checks payable to Spotsy County Food Service.

Please sign the photo release form, your child might even make our Twitter page

Photo Release Form

Full name: _____

Address: _____

City: _____ State _____ Zip _____

School Child attends _____

I am the (father/mother/guardian) of the above mentioned minor. I agree that any photograph taken of my child by the licensed parties is owned by the licensed parties, and may be used for promotional purposes by the licensed party.

Yes, I give permission to take my child's picture

No, I do not wish for my child's picture to be taken

Print Full Name _____

Signature _____

