

Birthday Party Reservation Form

(Please reserve at least 2 weeks prior to desired date)

Name: _____ Seymour School District Resident: _____

Phone number: _____ Email: _____

Age/Grade of Swimmers: _____ Group size: _____

Date of Birthday Party: _____ Time: _____

- Fee includes 3 hours of pool and classroom time
 - Birthday Parties are held only during open swim hours

Aquatic Center Expectations:

❖ Children under the age of 12 must be accompanied by an adult/guardian over the age of 16 in the water actively supervising at all times. (1 adult per 5 swimmers)

• All Pool and School rules will be enforced

❖ Patrons are allowed to decorate. We ask that all food and gifts stay in the classroom. Decorations and food must be cleaned up before you leave and the classroom is ready to go for the next day.

I have read all the Aquatic Centers Expectations: Please Initial: _____

Birthday Party Fees:	Seymour Residents:	Non-Seymour Residents:
10 or less Swimmers	\$40.00	\$80.00
11-20 Swimmers	\$50.00	\$100.00
21-30 Swimmers	\$60.00	\$120.00

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Date Received: _____ Classroom Booked: _____

Payment Due: \$ _____ Cash: _____ or Check Number: _____

Directors Signature: _____ Date: _____