



Birthday Party Request Form and Commitment Contract

First choice date of party: _____ Second choice date: _____

Party must be held during museum hours (including clean-up time)

Mondays: closed Tue/Thur: 12p-6p Wed/Fri/Sat: 10a-4p Sun: 12p-4p

Requested 2-hour time slot: _____

This contract is for UP TO 25 guests including adults. Under 1- free/do not count in the total.

Approximate number of guests: _____ children and _____ adults

Child's Name: _____ Age: _____

Birthday Child's Shirt Size: Youth Small YMed YLrg YXL Adult Small AMed ALrg

Parent/Guardian(s): _____

Address: _____

Contact phone: _____ Email: _____

Current Discovery City Children's Museum Member? Yes No

Contract Acknowledgement:

I understand that the terms defined in the birthday party contract were written with the intention to preserve the quality of the museum and to appreciate the value of the Discovery City staff. Therefore, I agree to adhere to the terms of this birthday party contract (see p.2)

Signed: _____ Date: _____

- ✓ Contracts and deposits must be **DROPPED OFF** at Discovery City Children's Museum (317 Grand River Ave.) or at Port Huron Recreation Department (2829 Armour Street) in order to save the date.
- ✓ Payments may **NOT** be taken over the phone.
- ✓ Reservation payments may be made in cash, check, or credit card.



Birthday Party Contract Terms and Conditions

Pricing: \$200.00

10% Discount for members (\$180.00 for current Discovery City Members)

- **50% due at time of contract. Final 50% due one week before the party.**
- **100% refund if party is canceled 7 days prior to the event.**
- **100% account credit to Discovery City Children's Museum/Port Huron Recreation Department if canceled 1-6 days prior to the event**

Includes:

- **Private usage of our party room for 2 hours (this includes clean-up)**
- **You may arrive up to 30-minute early for set-up (up to 2 adults and 1-2 children)**
- **25 guests' admission to Discovery City Children's Museum (under 1 free)**
****We recommend a 5 children:1 adult ratio for supervision purposes.**
- **Birthday shirt for the celebrated child**

Options:

- **\$5.00 per additional guest (up to 10 additional guests)**
- **Catering by Dot's Candy Bar. See attached menu**

Additional Notes:

- **A waiver will need to be filled out for each FAMILY in attendance. Waivers can be picked up, or delivered digitally to the parent/guardian in advance of the party.**
- **No person, child or adult, will be allowed to participate in the museum activities without a signed waiver.**
- **All food/beverage brought into the museum must be made in a commercial kitchen (no home-baked goods allowed)**
- **All food and drink MUST be consumed in the party room. No food or drink on the museum floor.**
- **No use of alcohol, tobacco, vape, or prescription medications allowed at the museum.**