

# KOS PARTY REQUEST FORM

**Please read carefully.**

**Party Request:**

Call **310-314-0035** to arrange your party with one of our party coordinator.  
**Print this request form** and mail in along with your **\$100.00 non-refundable deposit.**  
**Due no later** than 10 working days before the party.  
**Important:** please note on memo of the check your **child's name and date of party.**  
There is a \$25.00 charge for late payments or returned checks.

**Final pay:** The balance is **due on the day of the party.** Cash or Check accepted.

**Tips:** Tips for party specialists are appreciated but not mandatory.

**Attendees:** Please provide us with the number of children attending the party **5 days in advance** of the party.  
If on the day of the party the number exceeds the original quote, KOS will charge **\$7.00** additional per child. If less, then KOS will charge the original quote.

**Fill in registration form completely and neatly. Thank you!**  
**Please call first for your quote. Each party varies based on type and number of attendees.**

**PARENT/GUARDIAN** \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell or Other Phone \_\_\_\_\_

Email Address \_\_\_\_\_

**PARTY STAR** \_\_\_\_\_ Age \_\_\_\_\_ Birth date \_\_\_\_\_

**PARTY STAR** \_\_\_\_\_ Age \_\_\_\_\_ Birth date \_\_\_\_\_

Type of party (write theme if applies): Birthday \_\_\_\_\_ Other \_\_\_\_\_

Number of Party Guests \_\_\_\_\_

Party Date \_\_\_\_\_ Actual Party Time \_\_\_\_\_ KOS Time \_\_\_\_\_

Location (circle one): Home Theater (if pre-booked) Other \_\_\_\_\_

Party Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Any Special Requests? \_\_\_\_\_

Have you done a KOS Party before? No [ ] Yes [ ] If so when? \_\_\_\_\_

*Waiver:*

*In consideration with the applicant's participation in the above activity, I waive and release all claims for damages, death, person injury, or property damage that may occur as a result of engaging in that activity. This discharges in advance Kids On Stage, Inc., it's employees and other agents for liability. I know that this activity involves a risk of accident and I willingly assume the risk. This waiver, release and assumption of risk are binding on my heirs and assigns. I hereby release and hold harmless Kids On Stage, Inc, it's instructors and employees for any claims.*

*I hereby consent to the photographing, recording or reproduction of any other manner of the likeness, voice and or activities of my child and further authorize Kids On Stage, Inc. to make unlimited use of reproductions. I understand I will not receive any monetary compensation, now or in the future of participating.*

*I have read and understand all the policies:*

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Where did you hear about Kids On Stage?**

Referred by \_\_\_\_\_ School/Store Flyer (where) \_\_\_\_\_  
LA Parent Magazine \_\_\_\_\_ Family Magazine \_\_\_\_\_  
Web site \_\_\_\_\_ Fair (where) \_\_\_\_\_  
Other \_\_\_\_\_  
Comments: \_\_\_\_\_

**Please mail in this registration form and your \$100.00 deposit to:**  
*Reminder: Please write name of the child and date of party in the memo area.*

**KIDS ON STAGE, INC.**  
P.O. Box 3664  
Santa Monica, CA 90408-3664

310-314-0035 Phone  
310-581-9331 Fax

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*For office use only:*

Party booked by \_\_\_\_\_ Date \_\_\_\_\_  
Party Quote \$ \_\_\_\_\_ Art & Extras Quotes \$ \_\_\_\_\_ Total Quote \$ \_\_\_\_\_  
Art & Extra Requests \_\_\_\_\_

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Final Party Guests Count \_\_\_\_\_  
Deposit Paid \$ \_\_\_\_\_ Check# \_\_\_\_\_ Date received \_\_\_\_\_ Confirmed receipt \_\_\_\_\_  
Balance Due \$ \_\_\_\_\_ Check# \_\_\_\_\_ Date received \_\_\_\_\_

Notes \_\_\_\_\_

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