					O160 - Rev 2/16
Birthday Child Name:			Seating:	Staple Receipts Here	
Party Parent Name:				Date:	
You MUST brown this completed guest list when you arrive a	ing this list and check	complet	te with na arty Cen		r birthday party rty. We use
this list to check in guests you have agreed to pay As described in your Birthday Party Agreement, yo We will hand stamp each paid guest on this list as required to purchase the buffet or guest part or you may request that their buffets be added to PREPAID PARTY PACKAGE GUESTS	ur reserva they cheo t y packa o your final	ation de ck in. <u>A</u> ge for a	tails the iny gue: admissi	number of prepaid guest sts not prepaid and not	s in your group. ton this list are y pay individually
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APM STAFF USE

Upon check-in, verify with the party parent how s/he wishes us to account for guests not on the list above.

Any additional guests must pay separately for their own buffet or party package admission
With my initials here, I authorize that any additional guests may be added to my bill and I will be
responsible to pay for these additional guests at the conclusion of the party.