

# BIRTHDAY PARTIES

**Host your child's next party at the Jewish Educational Alliance!**

## **IMPORTANT INFORMATION**

All birthday parties must be scheduled at least two (2) weeks in advance.

The attached form must be completed and a non-refundable \$100 deposit paid in order to reserve your date.

The balance of your party fee must be paid in full two (2) weeks prior to the event. If the event is scheduled with less than two (2) weeks' notice, fees must be paid in full at time of reservation.

Cancellations must be made at least one (1) week in advance.

Parties are pending availability.

Parties may be sharing space with members or program participants. In the event of inclement weather an alternate Party Location will be available.

Parents/Guardians of the birthday child are expected to be present for the duration of the party.

A complete guest list must be provided. Parties are for 15 children maximum. There will be a \$7 fee for each additional child over this limit.

All parties include set up and clean up and an onsite party attendant to assist with needs.

Solid-colored tablecloths, plates, cups, napkins, cutlery and pitchers of water/lemonade are available for an additional fee of \$25.00.

Please bring your own decorations and refreshments.

**IMPORTANT: NO PORK , MEAT OR SHELLFISH MAY BE SERVED.** All food must be Dairy / Parve.

You may arrive at the party room no more than 30 minutes prior to the start of your event. Please leave the party room no more than 15 minutes past the scheduled end of your event.

Birthday Parties cost \$165.00. Members receive \$25.00 off their Party Package. An additional \$25.00 will be charged per 15 minutes over the allotted party time. Splish Splash Pool Party will have an additional \$20.00 Lifeguard fee.

**Pool Party Acknowledgement:** Before children are allowed in the pool a lifeguard must explain general pool rules and ensure that each participant can pass a swim test. If a child cannot swim or does not pass the swim test, he/she must remain in the shallow area and/or wear a life vest (PFD).

**IMPORTANT INFORMATION cont.**

We take pride in our facility and expect the highest behavior standards of our staff, our members and our guests. Individuals or groups who damage JEA or personal property, or are disruptive, will be charged for damages and may be asked to leave the facility.

The JEA is not liable for loss or damage to any personal property.

For questions, please contact Callie Smith at [birthdayparties@savj.org](mailto:birthdayparties@savj.org) or 912-355-8111, ext. 219.



# Birthday Party Registration Form



### CONTACT INFORMATION:

Contact Name: \_\_\_\_\_

JEA Member # \_\_\_\_\_ or check if Non-Member

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### PARTY INFORMATION:

Parties are only available on Sundays

Date of Party: \_\_\_\_\_

Alternate Dates (if unavailable): \_\_\_\_\_

Day of Party: \_\_\_\_\_ Time of Party: \_\_\_\_\_

Type of Party: \_\_\_\_\_

Total Number of Children Attending Party: \_\_\_\_\_

I consent to the use of my/my child's photograph by the JEA for publicity purposes.

Signature: \_\_\_\_\_

*\*I hereby release and hold harmless the JEA, its employees, agents and representatives from and against all losses, claims, damages, expenses or other liability which might result from any injuries or death or property damage sustained by me/my child while at the JEA (whether or not such injuries are caused by acts of commission or omission or by negligence of the JEA) or which relate to the emergency or medical treatment of me/my child.*

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

***I accept this document as invoice for payment due upon receipt:***

**Date:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

For Office Use Only: \$100.00 Non-Refundable Deposit Paid Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Total Party Balance Paid Amount: \$ \_\_\_\_\_ Paid Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

# Please select 1 of the following birthday party choices:

(All parties include set up of tables, chairs, and specialty equipment if so chosen. Lemonade and water are provided. Party guests are not permitted to use the facility until the start of the party. Party host may arrive 30 minutes early for any additional set up.)

**Outdoor Birthday Party: \$165**

**Indoor Birthday Party: \$165**

Check all add-ons that you wish to add to your birthday party package:

**\*Due to COVID-19 precautions, no indoor parties are offered at this time\***

- |  |  |
|--|--|
| <input type="checkbox"/> Birthday-themed tablecloth, plates, cups and cutlery: \$45  | <input type="checkbox"/> Birthday-themed tablecloth, plates, cups and cutlery: \$45  |
| <input type="checkbox"/> <i>Fitness/Dance Party Add-On: \$75</i>   | <input type="checkbox"/> <i>Fitness/Dance Party Add-On: \$75</i>   |
| <input type="checkbox"/> <i>Micro-Sports Party Add-On: \$75</i><br>>Options: Soccer, Basketball, Football, Baseball                                      | <input type="checkbox"/> <i>Micro-Sports Party Add-On: \$75</i><br>>Options: Soccer, Basketball, Football, Baseball                                      |
| <input type="checkbox"/> <i>Mermaid Party Add-On: \$100</i><br>>Mermaid only included in first hour of party, additional party time is self-entertained. | <input type="checkbox"/> <i>Mermaid Party Add-On: \$100</i><br>>Mermaid only included in first hour of party, additional party time is self-entertained. |
| <input type="checkbox"/> <i>Cool Craft Party Add-On: \$100</i><br>>Pottery Instructor available upon request   | <input type="checkbox"/> <i>Cool Craft Party Add-On: \$100</i><br>>Pottery Instructor available upon request   |

Number of expected guests: \_\_\_\_\_  
Additional \$7 fee for each guest over 15 guests: \_\_\_\_\_

Number of expected guests: \_\_\_\_\_  
Additional \$7 fee for each guest over 15 guests: \_\_\_\_\_

For Office Use Only: Member Discount? Y N Deposit paid on: _____ Total balance: _____ Paid on: _____
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