



St. James' Church Kindergarten (Gilstead)

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Birthday Celebration Form

Date: _____

1. CHILD'S PARTICULARS

Name	
Class	

2. PARENT/GUARDIAN'S PARTICULARS

Name	
Relationship to Child	
Contact Number	
Vehicle Number (for parking)	

2. DETAILS OF BIRTHDAY CELEBRATION

Date of celebration	
Type & Weight of Cake	
Name of Cake Shop	
Other Food Item/s (if any)	

We look forward to having you celebrate your child's birthday. We would like to request that food items have no nuts and as little icing and sugar as possible. If you are giving out party packs, these should contain items that are suitable and safe for children of that age. If party packs include any food items, please ensure they are reflected in the form above.

For the celebration, please provide disposable plates, forks, serviettes and lighter, if needed.

Please submit this form **at least 3 working days in advance** of the birthday celebration to the class teacher or office.