

Birthday Celebration Form

Date: _____ Centre: _____

1. CHILD'S PARTICULARS

Name	
Class	

2. PARENT/GUARDIAN'S PARTICULARS

Name	
Relationship to Child	
Contact Number	

2. DETAILS OF BIRTHDAY CELEBRATION

Date of celebration	
Type & Weight of Cake	
Name of Cake Shop	
Other Food Item/s (if any)	
Number of adults attending the party	

We look forward to having you celebrate your child's birthday! Please ensure any cakes, snacks, or food items: **DO NOT CONTAIN NUTS, AND HAVE 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.

Parent/Guardian's Acknowledgement:

I confirm that I have read and understood the above, and that all food items DO NOT contain nuts.

_____ (Signature) _____ (Name) _____ (Date)