

EVENT INFORMATION

NAME _____ E-MAIL _____ PHONE _____

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MAILING ADDRESS _____

VENUE ADDRESS _____

OCCASION _____ DATE _____ TIME _____

OF GUESTS _____ AGE RANGE _____ WOULD YOU LIKE US TO TAKE REQUESTS? _____

PLEASE LIST ANY SPECIAL REQUESTS, GAMES OR EXTRAS YOU WOULD LIKE: _____

ANYTHING ELSE WE SHOULD KNOW? _____

THANK YOU FOR CHOOSING TRIAD PARTY DJ. LET'S HAVE A PARTY!