



## Planning Questions

1. What is the birthday participant's name? How old are they *turning*?  
\_\_\_\_\_
2. How can we contact you? Include Caregiver(s) names & phone number  
\_\_\_\_\_  
\_\_\_\_\_
3. Are there any allergies, food preferences, or personal safety measures we should know?  
\_\_\_\_\_
4. Are there any known sensory preferences for the birthday participant or their guests?  
\_\_\_\_\_  
\_\_\_\_\_
5. What colours would the birthday participant enjoy for decorations?  
\_\_\_\_\_
6. What theme would the birthday participant enjoy for their party decorations and activities?  
\_\_\_\_\_  
\_\_\_\_\_
7. Are there any unique needs we should know about to accommodate your birthday participant or their guests?  
\_\_\_\_\_

### We've made it to the end here is our check of list of things to do next!

- |   |   |
|---|---|
| <input type="checkbox"/> Party Deposit (\$200)                    | <input type="checkbox"/> Final Payment (\$165 / \$115)                      |
| <input type="checkbox"/> Confirm Date _____                       |   |
| <input type="checkbox"/> Collect Forms                            | <input type="checkbox"/> Planning Check-In (2 weeks prior date _____)       |
| <input type="checkbox"/> Create Invitations (Digital or Physical) | <input type="checkbox"/> Check-In Guest Number (Yes____ No ____ Maybe ____) |