



Splashtacular Birthday Party Package Form

Party Date & Day of the Week: _____
Swim Time (2 hours, we do not break up swim times): _____
Party Room Time (1 hour): _____
Event Name: _____ Birthday Party

Your Full Name: _____
Phone Number: _____
Address: _____
City: _____
Zip Code: _____
Email Address: _____

Beverage Selection (choose one or two):

Pepsi Sierra Mist Fruit Punch Lemonade

Cake Flavor (choose one): Yellow Chocolate Marble
Cake Theme: (See cake theme on our website) # _____ Name: _____
Cake Inscription: _____

Notes/ Add-ons: _____

E-Invitations (choose one): Accept Decline

Thank you,
Spirings Water Park
262-970-5262

Once you fill out the form, please send to mlindsey@theinglesidehotel.com and someone will be in contact with you to go over party details and payment information.