



ACADEMY SPORTS COMPLEX



BIRTHDAY PARTY REQUEST

Please complete the information below and mail with \$100 deposit to:

ACADEMY SPORTS COMPLEX

875 Conklin Street

Farmingdale, NY 11735

email: chris@academysportscomplex.com

phone: 631-393-2784

Contact Person

Address

City

State

Zip

Phone

Cell

E-mail

Birthday Child
Name

Age

Party Date
Request

Time

Number of
Children

Number of
Adults

Signature

Date

Date/Time subject to availability. All participants using the facility must sign a Medical Waiver. No Exceptions. Third Parties are not permitted to host for-profit programs or other non-Academy Sports Complex leagues, clinics or programs without prior approval.