



## Birthday Party Reservation Form

Celebrate your birthday at the Bob Jones Nature Center! All proceeds benefit the education and conservation programs of BJNC.

Email or mail completed Reservation Form to:

Address: 355 E Bob Jones Rd Southlake, TX 76092 – Email: [admin@bjnc.org](mailto:admin@bjnc.org) – Phone: (817) 491-6333

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Date of Party: \_\_\_\_\_ Time of Party: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Age turning: \_\_\_\_\_  Male  Female

Parent/ Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Special Needs/Accommodations \_\_\_\_\_

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Approximate # of Children: \_\_\_\_\_ Approximate # of Adults: \_\_\_\_\_

Type of Party (Check One):

- |                                                                                            |                                                                    |
|--------------------------------------------------------------------------------------------|--------------------------------------------------------------------|
| <input type="checkbox"/> Butterfly Flutterby                                               | <input type="checkbox"/> Animal Investigators (with ZOONIVERSITY)* |
| <input type="checkbox"/> Dino Diggers                                                      | <input type="checkbox"/> Arts on the Go mobile arts studio **      |
| <input type="checkbox"/> Birds of a Feather                                                | <input type="checkbox"/> Wild Kratts Adventure                     |
| <input type="checkbox"/> Leapin' Lizards                                                   |                                                                    |
| <input type="checkbox"/> Other (BJNC can accommodate your child's special interest): _____ |                                                                    |

### Important Information to Know:

#### Cost:

\$200 for 10 children

\*Additional charge for Animal Investigators party. Price dependent on type of "show." Check out [www.Zooniversity.org](http://www.Zooniversity.org) for pricing and details.

\*\* Additional charge for Arts on the Go party. Contact [Heather Cordova](mailto:Heather.Cordova@bjnc.org) for pricing.

\$15 for each additional child

Max 30 Guests Indoors (Due to limited space this includes both children and adults.)

Max 50 Guests Outdoors (Due to limited space this includes both children and adults.)

**50% deposit due 2 weeks before party date.**

- Party Hostess will greet you and help set up for the party, review the celebration plan, assist with serving, and help clean up.
- All parties start/end in the Birthday Room unless we are doing the party under the tent.
- Please bring any snacks, drinks and a cake the party guests might want to eat.

- BJNC has general themed decorations, but you are welcome to bring your own decorations as well.
- BJNC staff provides a presentation, a short tour of our hiking trails and an animal- or activity-themed craft.
- All participants must sign a Release & Indemnification Form and a Photo Release Form in order to participate in birthday party activities.

Facility Rules:

- Respect the plants & wildlife of Bob Jones Nature Center. Observe – Do Not Disturb.
- Stay on established trails. Be mindful of poison ivy.
- Wear appropriate clothing, including closed-toed walking shoes and socks if planning to hike.
- No knives or other weapons of any kind allowed on the property.

Terms and Agreements:

- I understand that my party must be reserved at least two weeks in advance and I must prepay 50% of the total cost. \_\_\_\_\_(initial)
- I understand that I am responsible for all party guests arriving and leaving the party. I will supervise guests prior to the party and make sure that all guests leave the facility with an approved adult. \_\_\_\_\_(initial)
- I understand that I am expected to contact Bob Jones Nature Center the week prior to my event to confirm the number of guests who will be attending the party. \_\_\_\_\_(initial)
- I understand that I will be charged an additional \$15/child the day of the party over ten guests and that I can only have 30 guests max (indoors) or 50 guests max (outdoors). \_\_\_\_\_(initial)
- I understand that all participant must sign a Release & Indemnification and Photo Release form prior to participating in Birthday party activities. \_\_\_\_\_(initial)
- I understand that Bob Jones Nature Center reserves the right to terminate my party at any time if any of the above statements are not followed or if guests do not follow facility rules. No refunds will be given for a terminated party. \_\_\_\_\_(initial)

I have read and understand the rules and information detailed in this Reservation Form.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

<b><i>For Office Use Only</i></b>	
Date Received: _____	Instructor Name: _____
Payment Received	<input type="checkbox"/> Amount/Payment Method _____
<input type="checkbox"/> Release & Indemnifications Signed	<input type="checkbox"/> Photo Releases Signed



## Bob Jones Nature Center Photo Release

Please indicate if you are signing this Photo Release Form for an adult or a minor child:

Adult  Minor Child

I understand that myself or my child, \_\_\_\_\_(name) may be photographed and I hereby grant to the Bob Jones Nature Center ("BJNC") the right and permission to copyright and use, re-use, publish and republish photographs or pictures of \_\_\_\_\_, which may be included intact or in part, or reproduction hereof in color or otherwise, in any and all media now or hereafter known, including but not limited to the BJNC website, promotion, advertising or any other purpose whatsoever. I also consent to any changes or alterations as to color, size, shape, perspective, context, foreground or background of the picture. I hereby release, discharge and agree to hold harmless BJNC, its officers, directors, employees, successors, assigns, representatives, agents and attorneys and all persons functioning under its permission or authority, from any liability by virtue of any reason in connection with the making and use of such photographs, any blurring, alteration or use in composite form whether intentional or otherwise, that may occur or be produced in the taking of said picture or in any subsequent processing thereof, as well as any publication thereof.

\_\_\_\_\_ Yes \_\_\_\_\_ No

\_\_\_\_\_ Adult or Parent/Guardian Signature



## Bob Jones Nature Center Release and Indemnification

Please indicate if you are signing this Release and Indemnification Form for an adult or a minor child:

Adult  Minor Child

In consideration of the opportunity for myself or my minor child, \_\_\_\_\_, to use the premises of Bob Jones Nature Center and Preserve, owned by the City of Southlake, managed by the BJNC Organization, and located at 355 E. Bob Jones Road, Southlake, TX. I agree on behalf of myself or my child, our legal representatives, heirs and successors and assigns to the terms of the Release and Indemnification.

I understand that the Bob Jones Nature Center and Preserve is largely rough, unimproved land, and that driving and walking on it are inherently dangerous activities that may expose individuals to hazards or risks that may result in illness or personal injury. I understand the nature of those hazards and risks and accept the premises in their present as-is condition. I am aware that other persons may be present from time to time within the same area and that myself or my child's activities need to be conducted in a careful and prudent manner with due regard for the safety and well-being of those other persons. I am aware that the Bob Jones Nature Center and Preserve is in an area remote from medical care, and that Bob Jones Nature Center and Preserve, City of Southlake and BJNC Organization cannot guarantee the availability of emergency medical services or emergency transportation to medical facilities.

I, for myself and/ or on behalf of my child, assume full responsibility for all risks associated with use of the Bob Jones Nature Center and Preserve, and for myself or my child, and our legal representatives, heirs, and successors and assigns, agree that the Bob Jones Nature Center and Preserve, City of Southlake, and BJNC Organization and any of their directors, officers, owners, affiliated corporations, agents, or employees ("Released Parties") shall not be liable for any damages to persons or property. I, FOR MYSELF, OR MY MINOR CHILD, AND OUR LEGAL REPRESENTATIVES, HEIRS AND ASSIGNS RELEASE THE RELEASED PARTIES FROM ANY LIABILITY FOR ANY CLAIMS FOR LOSS OF OR DAMAGE TO PROPERTY AND FOR ANY ILLNESS OR INJURY TO PERSON, INCLUDING DEATH WHICH MAY RESULT IN CONNECTION WITH USE OF THE BOB JONES NATURE CENTER AND PRESERVE. THIS RELEASE COVERS ANY DAMAGE OR INJURY FROM ANY CAUSE WHATSOEVER, INCLUDING THE NEGLIGENCE OF THE RELEASED PARTIES. I FURTHER AGREE FOR MYSELF, OR MY MINOR CHILD, AND OUR LEGAL REPRESENTATIVES, HEIRS AND ASSIGNS TO INDEMNIFY AND HOLD HARMLESS THE RELEASED PARTIES FROM LOSS, DAMAGE, LIABILITY, CLAIMS, OR EXPENSE FROM ANY CAUSE WHATSOEVER, INCLUDING THE NEGLIGENCE OF RELEASED PARTIES, ARISING IN CONNECTION WITH THE USE OF THE PREMISES BY MYSELF OR MY CHILD.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Adult (PRINT)

\_\_\_\_\_  
Name of Minor Child (If applicable)

\_\_\_\_\_  
Signature