

# Princess Party

Enchanted Date - March 21, 2010

Magical Time - Appointments starting at 11:00 a.m. *Appointments needed*

Royal Address - Premiere Banquet Center 2000 Constitution Avenue, Olean, NY 14760

**\$30** (includes one princess and one adult)

**\$15** (each additional family member)

Princesses must be accompanied by an adult

**Activities include a princess hairstyling, magical nail painting, a royal crowning and a princess tea party luncheon with live entertainment.**

Proceeds to benefit



The Southern Tier

child advocacy center

Working Together for our Children

For more information

(716) 372-8532

A Program of:



## Princess Party 2010 Registration SIGNED PARENTAL RELEASE REQUIRED FOR PARTICIPATION

To purchase your tickets for this magical event and schedule an appointment, please complete and forward this registration form with payment to The Southern Tier Child Advocacy Center.

Make checks payable to: Southern Tier Health Care System, Inc.

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

Age \_\_\_\_\_ # of Princesses \_\_\_\_\_ # of Adults \_\_\_\_\_ Amount Enclosed \_\_\_\_\_

Forward Registration and Payment to:

Southern Tier  
Child Advocacy Center

772 Main Street  
Olean, New York 14760  
Phone 716 372-8532  
Fax 716 372-8574

I hereby give my child permission to fully participate in the "2010 Princess Party" activities. I do hereby, absolve, unconditionally release and agree to hold harmless the Southern Tier Child Advocacy Center, The Premiere Banquet Center and Southern Tier Health Care System, Inc., staff, leaders, volunteers and agents for any and all injuries which may be sustained by my child in relation to participation in the "2010 Princess Party" activities. In the event that my child is injured, I authorize the party or person in charge to seek medical care. I further permit promotional purposes.

Parent /Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_