



SEA Form 2020

New [] Rebook []

School/Daycare Name: _____

Contact Name: _____ Contact Phone Number: _____

Email: _____

Event Date: _____ Park Location: _____ **Must Purchase 15-49 tickets for group rate**

Item	Price	Quantity	Total		
Group Package			\$		
Unlimited Drink	\$6		\$		
Sweet Treat	\$3		\$		
Group Total (Pre-Tax)			\$	Total (Tax)	\$

\$14.99- admission only

\$22.99- admission, hotdog, chips and a drink

\$28.99- admission, hamburger or hotdog, chips and unlimited drinks

Tax Exempt Form: YES [] NO []

TAX EXEMPT STATEMENT: I, the undersigned, confirm that the purchase is authorized by, and being made by, the exempt entity, with funds from the exempt entity and not the individual.

Signature _____

Print Name _____

Title _____

Complete and return this form along with tax letter to:

Hawaiian Falls Garland

4550 N. Garland Avenue, Garland, TX 75040 or **Email to: cmckellen@hfallswaterpark.com**

Items are non-returnable and non-refundable.

For questions email CJ McKellen – **cmckellen@hfallswaterpark.com**

Thank you again for choosing Hawaiian Falls Garland for your group outing and we look forward to hosting your event.

Group Representative Signature

Date