



GuarinoGroup  
PRODUCTIONS

## Graduation Party Information Form

For: \_\_\_\_\_

High School: \_\_\_\_\_ Future Plans: \_\_\_\_\_

Contact Person: \_\_\_\_\_

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

Date of Event: \_\_\_\_\_

Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Location of Event: \_\_\_\_\_

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

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

Number of Guests: \_\_\_\_\_ Age Range of Guests: \_\_\_\_\_

Please list any comments and/or announcements:

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Please list any music you would like to hear during the event:

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Please list any music you would **not** like to hear during the event:

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**Please email your completed form to [Events@GuarinoGroup.com](mailto:Events@GuarinoGroup.com)**

**Thank you!**