



GROUP EVENT QUESTIONNAIRE

Please print and fill out questionnaire.

When complete, fax to 610-814-6975 or scan and e-mail to jess@themillexperience.com.

If you have any questions about this form please call 610-865-1465.

Contact Information

Name _____ Phone Number _____

E-mail Address _____

Event Information

Group Name _____

Estimated Number of Participants _____

Date Interested In _____

Time Interested In _____

Group Interests: Please circle all that apply

Laser Tag

Miniature Golf

With Food

Without Food

Brown Bagged Lunches

Hot Dog/Pizza with Chips and Fountain Drink

If your group is tax exempt, please provide us with a copy of your certificate upon payment.