# Your Bar/Bat Mitzvah Celebration Planner

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#### **Celebration Information**

Date of celebration:	(mm/dd/year)	<u> </u>
Time of celebration: Starting time		, Ending time
		_
Primary contact:		
Child celebrating Bar/Bat Mitzvah:		
Phone:		
Email:		
Alternate phone:		
Address:		
City:	State:	Zip:
Location of celebration:		
Address:		
City:	State:	Zip:
Location contact:		
Please provide us with the names o	of the immediate fa	mily:
Mother:		
Father:		
Siblings and ages:		

#### **Activities**

Is there a party theme	?	□ Yes,			_ □ No
Would you rather the a	activities be focused o	n entertaining	□ Children	□ Adults	□ Both
Will there be a cocktai	hour during which yo	ou would like us to	entertain the chil	dren? □ Ye	es 🗆 No
Would you like us to p	lay games with the ch	ildren throughout t	he party?	□ Ye	s 🗆 No
Please check games de	esired				
□Basketball free throw	□Conga line	□Coke and F	Pepsi □Freeze	dance	
□TV/Music trivia □M	ummy wrap (requires	toilet paper)	cavenger hunt	□ Limbo	
Props/Prizes Props and prizes add a	n interesting element	to some celebratio	ns.		
Would you like to inclu	ide:		□ props □	prizes 🖂	gift bags
Would you like Enterta	inment to provide the	gift bags, prizes ar	nd props?   Yes	□ No, I v	vill provide
What is your budget fo	or prizes \$	props \$	gift	bags \$	
Line/group dances:  □ Macarena □Electric	Please select which of Slide □ New Elect				
□Snowball □Cotton	Eyed Joe	□Cha-cha Slide			
Other special requests	or activities				

# Dinner and special activities

Will the children and adults eat at the same time?			□Yes	□No
If no, please of	describe meal arrangement:			
Will they have	the same meal?		□Yes	□No
Will someone	recite the blessing over the challah?		□Yes	□No
Name:	Relation:	_		
Will someone	recite the blessing over the wine?		□Yes	□No
Name:	Relation:	<u> </u>		
Will either of t	the parents (or anyone else) be giving a spe	eech?	□Yes	□No
Will there be a	a Bar/Bat Mitzvah/birthday cake?		□Yes	□No
Who will whee	el out the cake? Name:	Relation:		
Will you have	a candle lighting ceremony?		□Yes	□No
Candle	Name of person to light candle	Relati	on	
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				

14	Good luck candle			
During t	he Horah, please indicate who you	would like to b	e lifted in a chair:	
□Will no	t be lifting anyone			
	Name		Relation	
		I		
Addition	al information:			

# **Song Selection**

Please play these songs at my celebration:

Song	Artist

#### Please $\underline{\text{DO NOT}}$ play these songs at my celebration:

Song	Artist

**Additional comments:**