

Constituent: \_\_\_\_\_

DATE: \_\_\_\_\_

Order: \_\_\_\_\_

RECEIVED BY: \_\_\_\_\_

FOLLOW UP: \_\_\_\_\_



## SCHOOL TOUR REQUEST

### CONTACT INFORMATION

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

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

### SCHOOL INFORMATION

School Name: \_\_\_\_\_ Anticipated Group Size: \_\_\_\_\_

*\*10 participant minimum*

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

Ages of participants:

Elementary (k-5)

Middle School (6-8th)

High School (9-12th)

**TOUR REQUESTS:** Tuesday, Wednesday, Thursday (available on the hour from 10:00 am-3:00 pm)

Requested date: \_\_\_\_\_ Alternate date: \_\_\_\_\_

Time of tour: Morning \_\_\_\_\_ Afternoon \_\_\_\_\_

Please select from the following themes:

The Wonders of Color

Amazing Animals

Tall Tales: The Art of Story Telling

Masters of Materials

Design Thinking

Social studies. THEME: \_\_\_\_\_

I am interested in adding a hands-on learning experience for an additional \$100 fee. (30 minutes)

Please contact Brian Buttafuoco, Director of Education, to learn more about hands-on learning experiences at [bbuttafuoco@museumaacm.org](mailto:bbuttafuoco@museumaacm.org).

### ADDITIONAL INFORMATION

Any additional information we should know?

Please return form to [tours@museumaacm.org](mailto:tours@museumaacm.org)