

Knock Knock Children's Museum

2018 Summer Field Trip Request Form

Ages 5-8



Your museum visit is confirmed once you receive a confirmation email.

Name: _____ Title: _____

Camp, School or Organization Name: _____

Address: _____

City/State/Zip: _____

Work Phone: _____ Cell Phone: _____

Email: _____

Name of Person Filling Out Form (If Different from Above) _____

Tours are not Scheduled on Mondays and Wednesdays

Date You Wish to Visit: _____

Time: Circle One

First Choice: _____

10:00am – 12:00pm

1:00pm – 3:00pm

Second Choice: _____

Third Choice: _____

Trip Cost

	NUMBER	PRICE	TOTAL
SELF-GUIDED FIELD TRIP <i>(minimum 15 children)</i>		@ \$10/CHILD =	
NUMBER OF ADULTS <i>(one adult free for every 5 children)</i>		@ FREE =	
Only the required number of adults/chaperones may attend.			TOTAL DUE=

Cancellation and Change Policy

More than 15 days in advance = Full Refund

Less than 15 days in advance = No Refundable Credit

Payment Method

To guarantee your field trip, a check, money order or credit card information must be received 15 days prior to scheduled trip

Please Initial below to verify you understand the policies and procedures:

- _____ Confirmed field trips that do not arrive will be **CHARGED THE FULL AMOUNT**.
- _____ Payment is expected for the full confirmed amount regardless of absent children.
- _____ Field trip fees are applied to all children including museum members.
- _____ I also acknowledge that I have read and accept the Museum's field trip policies.

Email forms to: fieldtrips@knockknockmuseum.org

Because of limited space, having lunch on the grounds is not allowed.