

# Frederik Meijer Gardens & Sculpture Park School Group Registration

**Please make a copy of this form and fax it to Suzie Doten at 616-957-5792.**

Tour Date \_\_\_\_\_ Tour Day \_\_\_\_\_ Tour Time (from) \_\_\_\_\_ (to) \_\_\_\_\_

Arrive by:  bus  car

Organization's Name \_\_\_\_\_ District \_\_\_\_\_ Zip \_\_\_\_\_

Teacher \_\_\_\_\_ Email \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Numbers in Group: Adults \_\_\_\_\_ Children \_\_\_\_\_ Grade Level(s) \_\_\_\_\_

Ratios: 1:4 PS, 1:6 El, 1:8 MS, 1:10 HS

School Tours \_\_\_\_\_ x \$3 each  
 Chaperones/Teachers \_\_\_\_\_ x \$3 each  
 Additional Adults \_\_\_\_\_ x \$7 each  
 School Programs \_\_\_\_\_ x \$5 each  
 Deposit (when applicable) \_\_\_\_\_ \$50 total

Lunches yes  no  Time \_\_\_\_\_

Please circle one of the following:

Guided Tours

School Programs

Self-Guided Discoveries

*Office use only*

Calendar

Keller Transportation Fund

Guided \_\_\_\_\_

Self-guided \_\_\_\_\_

Staff Teacher \_\_\_\_\_

ITINERARY

- |    |    |
|----|----|
| 1. | 1. |
| 2. | 2. |
| 3. | 3. |
| 4. | 4. |

Classroom Use

lunch

add-on

other

Time \_\_\_\_\_

Room \_\_\_\_\_

Cost \$ \_\_\_\_\_

NOTES / Special Requests

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date started:

Confirmation Sent:

Calling History: