

Colorado Railroad Museum

Field Trip Reservation Form

2017/18

Send the completed form to FieldTrips@crrm.org.

School Information:

School: _____ District: _____

Address: _____

School phone: _____ Fax: _____

Class information:

Teacher: _____ Grade: _____

cell phone: _____ Email: _____

Please identify any special needs your group might have:

special education ELL physical disabilities Other (please specify) _____

Program Specifics:

Check Program:

- On Your Own Trains! Westward to Colorado Outreach Program
 Build an exhibit Eating on the Rails Artifact Trunk

Date & time (we require at least 4 weeks notice to schedule your program):

1st choice: _____
Date of visit program time exit time

2nd choice: _____
Date of visit program time exit time

3rd choice: _____
Date of visit program time exit time

We will make every effort to schedule your program for your first choice.

Office use only

Date Rec'd: _____ by: _____

Tour guide confirmed: _____

Date Confm sent: _____ by: _____

Notes:

Cost:

_____ students @ \$4.00 ea = \$ _____

_____ chaperones (5/1 ratio) = \$ free _____

_____ additional adults @ \$10ea = \$ _____

Total cost of \$ _____

The museum admits 1 adult free for every 5 students!

After submitting your form, allow seven to ten days for processing. If you don't receive a confirmation email, call 303-279-4591. Please print legibly. Reservations are accepted by mail, phone or through our website. Be aware we require a 4 week advance of requested date.