Field Trip Request Form

How did you hear about us? _____



Smithsonian

Name of School:		
School District: School	Phone: ()	
Address:		
City/State/ZIP:		
Primary Contact: Email:		
If we need to reach you by telephone, please identify the prefer	red number: ()	
Names of Additional Teachers:		
<u> </u>		
Student ratio is one adult chaperone for every five student. The ratio for high school is one adult chaperone for every is 100, with 20 teachers/chaperones encouraged. R	en students (1:10). The maximum student group size	
Requested Date:	Please Select One Arrival Time Per Date:	
Field Trip Date 1 st Choice:	_ □ 9:30 a.m. □ 11:00 a.m. □ 12:30 p.m.	
Field Trip Date 2 nd Choice:	_ 9:30 a.m. □ 11:00 a.m. □ 12:30 p.m.	
Grade Level:	# of Adult Chaperones within ratio:	
Select Area of Study:		
☐ An Introduction to the American West☐ Moments In Arizona History☐ Spanish and Mexican Influences in Arizona	☐ Sustainability ☐ The Five Cs of Arizona ☐ The Oregon Trail and Westward Expansion	
Number of Students @ \$5/student = \$		
Additional Adults/Chaperones* @ \$10/person = \$		
TOTAL DUE: \$		
We accept cash, business checks, credit cards, and purchase ord receive an invoice. No refunds will be given for reduced *There is no charge for bus drivers or charge.	attendance the day of visit on pre-written checks.	
Method of Transportation: # of Buss(es): # of V	an(s): # of Personal Vehicle(s):	
Are there any special needs we should be aware of in advance of your visit?		

⇒Please return completed form to Wade Weber at wweber@scottsdalemuseumwest.org or the address below.

□ Questions? Please call (480) 530-3461.