

## **Field Trip Request Form**

## All reservations must be submitted at least 4 weeks in advance

Please select	one ☐ In-State N	Maryland School	☐ Out of S	tate School	
Is your schoo	ol □ Public	☐ Public ☐ Private		e	
Name	of School				
Addre	ess of School				
City			State		Zip
Coun	ty (required for all Mary	and School Groups)			
School Phone Number			I	Fax	Other
Teach	er in Charge		I	Email	
Select three	dates 1st Choice	e / / _	2nd Cho	oice / /	3rd Choice / /
Arrival Time	(please note, 10am is the	e earliest arrival time av	vailable)		
Grade Level	of Students				
EVILIDIT AF	MICCION				
Approximate	roximate Number of Students   Costs for Maryland Schools			s	Chaperones
	Costs for M Students: FI Teachers: FI Chaperones	REÉ REE		Costs for Out of Sta Students: \$8.50 Teachers: FREE Chaperones: \$5.00	te Schools
Would you li	ke to see a/an	☐ Davis Planetar	ium Show	☐ IMAX Sho	<b>W</b> * (an additional \$7.50 per person)
Is there a specific show you would like?					
Would you li	ke to schedule an	<b>Enrichment Prog</b>	gram?		
☐ Enrichmen	t Experience 🗆 C	bservatory (an ad	ditional \$7.50 pe	er student)	
Enrichment Title					Time
Would you li	ke to visit the Kids	Room? (an addition	nal \$2 per studer	nt)   Entry Time	
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Please submit this form by saving this filled out PDF document and emailing it to fieldtrips@marylandsciencecenter.org or click the SUBMIT button to the right to submit this form via Outlook.

Please note: This is not a reservation! A reservation confirmation will be generated using this form.