

Field Trip Request Form

All reservations must be submitted at least 4 weeks in advance

Please select one	☐ In-State Maryland School		tate School		
ls your school	☐ Public ☐ Private ☐	☐ Title One			
Name of School	ol				
	nool				
City		State		Zip	
County (required for	or all Maryland School Groups)				
School Phone Number		Fax	Other		
Teacher in Charge		_ Email			
Principal's Name		_ Email			
Select three dates	1st Choice / /	2nd Choi	ice//	3rd Choice / /	
Arrival Time (please note, 10am is the earliest arrival time available)			Departure Time		
Approximate number of buses			Grade Level of Students		
EVILIDIT ADMICCION	•				
EXHIBIT ADMISSION		Topologia		h	
Approximate Number	er of Students	_ leacners		naperones	
Cost for Maryland Schools Students: FREE Teachers: FREE Chaperones: FREE		St Te	Cost for Out of State Schools Students: \$8.50 Teachers: FREE Chaperones: \$5.00		
ADDITIONAL EXPERIENCES					
Would you like to see a/an Davis Planetarium Show (add \$8.50 per person) Dobservatory Visit (add \$8.50 per person)					
Is there a specific show you would like? (Please check our Opportunities Guide for available shows. Go to www.mdsci.org/opportunities to view the guide online)					
Would you like to sch	nedule an Enrichment Program	1? (add \$8.50 per per	son)		
Enrichment Title (Please check our Opportunities G	Guide for available programs. Go to www.mdsci.o	rg/opportunities to vie	w the guide online)		
Would you like to vis	sit the Kids Room? (add \$2 per student) 🔲	Entry Time		
Would you like to add Science Sacks for your group? (add \$3 per sack) Qauntity					
Estimated cost:	Payment Me	ethod: Che	eck Credit Card	Purchase Order (Maryland schools only)	
Please submit th	is form by saving this filled oເ	ıt PDF docum	ent and emailing it	to fieldtrips@mdsci.org.	

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