

**Virtual Field Trip Request Form**

|  |  |
| --- | --- |
| Teacher’s Last Name   | Teacher’s First Name  |
| Teacher’s Contact Phone  | Teacher’s Contact Email  |
| School/Group Name Grade Level/ Age Group  |
| School Address  |
| **Teacher Name(s) for All Teacher(s) Attending for Gold Rush Program:** please include Miss, Ms., Mrs., Mr. Click here to enter text. |

Have you visited us before? [ ]  Yes [ ]  No

If no, how did you hear about our field trip opportunities? [ ]  Word of Mouth [ ]  Public Programs Brochure

[ ]  Personal Visit to the Museum [ ]  Internet If Internet, please specify where:   \_

**What Museum Program(s) Would You Like To Schedule?**

**1-Hour Virtual Museum Programs (Limit of 35 screens per class)**

[ ]  Gold Rush [ ]  Nisenan [ ] Heading West

[ ]  Underground Tour [ ]  History Mystery (2 part program, please select 2 time slots)

**How many of each of the following will be attending?**

|  |  |  |
| --- | --- | --- |
| Students  | Teachers | Classes (up to 35 screens) |
|   |   |   |

How many students will be attending? (minimum requirement of 10 students)

 **Preferred Dates & Times For Museum Program(s)**

**Programs available on Monday, Wednesday, or Friday at 11AM& 1PM (unless otherwise discussed)**

|  |  |  |
| --- | --- | --- |
| ***1st Preference*** | ***2nd Preference*** | ***3rd Preference*** |
| Date  | Date  | Date  |
| Time  | Time  | Time  |

Notes or Comments?

Please note that this is not a confirmation. This request form does not guarantee you the program, date or time requested above. Program is confirmed once you receive an invoice.

**CANCELLATION POLICY**- We require a 1-week notice to cancel or reschedule programming. We will not issue a refund for cancellation less than 1 week from the original field trip date. If cancellation occurs less than 1 week before to a scheduled program, you must talk to someone from the education department to confirm your cancellation. **No Shows, No Calls will be charged the full balance in addition to the $50 late fee**.

**Please return form to:**

**Zoey Jennings**

**(916) 808-6896**

**zjennings@sachistorymuseum.org**

Fax (916) 808-5100

Address:

Sacramento History Museum

ATTN: Education Department

101 I Street

Sacramento, CA 95814