

~IN YOUR SCHOOL~

FIELD TRIP REGISTRATION FORM

Please note that this is not a confirmation. Your trip is confirmed when you receive a field trip confirmation letter.

Contact Information

PRIMARY CONTACT (ON SITE)	POSITION			
SCHOOL OR ORGANIZATION				
ADDRESS	CITY/STATE/ZIP			
DAYTIME PHONE	E-MAIL			
NAME OF PERSON FILLING OUT THIS FORM (if different from above)				

Program Preferences

TIME 9:45–11:15 a.m. 10–11:30 a.m. 10:45 a.m12:15 p.m. 11 a.m12:30 p.m. 1:30–3 p.m. Other	Please Note: Educators require 30-45 minutes to set up. Room needs to be available during this time.					
	AGE OF CHILDREN					
DATE (FIRST CHOICE)	(SECOND CHOICE) (THIRD CHOICE)					
WORKSHOP TOPIC (FIRST CHOICE)						
(SECOND CHOICE)						
SPECIAL REQUESTS/ADDITIONAL INFO (ie: Spanish Speaking Educator, Special Needs)						

Program Details

LOCATION WHERE EDUCAT	ORS CAN UNLOAD SUPPL	IES:				
LOCATION WHERE EDUCAT	ORS CAN PARK:					
ENTRY LOCATION:						
WHERE WILL THE EXPERIENCE TAKE PLACE? (ie: classroom, gym,)						
RESOURCES IN WORKSHOP	LOCATION: Please check a	ll available 🔾 Tables, Qty	Outlets, Qty	/ O V	Vater Sourc	.e, <i>Qty</i>
Trip Cost						
NUMBER OF CHILDREN:	(max. 25 children)	○ \$275 (0-10 miles)	⊙\$300 (11-20 miles)	○\$325 (21-	25 miles)	

(max. 25 children)

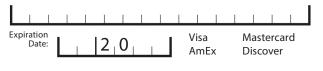
Payment Method

To guarantee your field trip, check, money order, or credit card information must be provided with your registration form.

• Check or money order enclosed, payable to **Kohl Children's Museum**

ADDITIONAL SESSION (same day/ location) # of children:____

- O Chicago Public Schools purchase order # _____
- Please use my credit card to hold this trip. Another form of payment will be submitted on or before the day of the trip. I also acknowledge that I have read and accept the Museum's field trip policies. Initial here:
- Please charge \$_____ to my credit card:



Completed by:

Cancellation and Change Policy

More than 30 days in advance = full refund Less than 30 days in advance = no refund

e day of the trip. I also acknowledge that I	Please initial here	
eum's field trip policies. Initial here: my credit card:	Confirmed field trips that do not show u will be CHARGED THE FULL AMOUNT	
.	Payment is expected for the full confirmamount regardless of absent children.	ed
Visa Mastercard AmEx Discover	Field trip fees are applied to all children, including Museum members.	100
	Chicago Public School Vendor # 14724	CSM2
Please submit form to fieldt	rips@kcmqc.org	KOHL CHILDREN

@ \$225 =

TOTAL DUE =

KOHL CHILDREN'S MUSEU

Kohl Children's Museum • 2100 Patriot Boulevard • Glenview, IL 60026 • (847) 832-6923 f: (847) 724-6469