



DAY GROUP BOOKING CONFIRMATION FORM

School/Group Name: _____ Trip Dates: _____

City: _____

Estimated Arrival Time: _____

Grade Level: _____

Departure Time: _____

Contact Name: _____

Email: _____

Phone: _____

Estimated Number of Students ~ _____ Chaperones ~ _____ Teachers/Staff ~ _____

Discount Eligibility ... Any Siblings? YES NO

Are you a New School or returning from before 2016? YES NO

Please choose one of the following Day Program options:

2 Programs @ \$35 per student

4 Programs @ \$55 per student

3 Programs @ \$45 per student

Other - Customized Program Structure

What are your learning objectives? *(Each program period is 1.5 hours in length)*

Do you require our staff to supply and serve your group lunch? YES NO
(Teachers/Staff will not pay for program - Adults pay only for lunch if applicable)

Please list your [Program Choices](#) below or ask us for recommendations.

1. _____ 2. _____

3. _____ 4. _____

Total fees are due in one composite cheque/credit card payment upon arrival.

THANK YOU FOR THE PRIVILEGE OF SERVING YOUR GROUP!