PENNSYLVANIA ANTHRACITE HERITAGE MUSEUM

GUIDED TOURS FORM

IMPORTANT INFORMATION

The count requested below must be completed and presented at the museum front desk on the day of your visit to insure proper charges for all in attendance.

| Reservation I | Date | Re | eservation T | ime(s) | |
|---------------------------------------|------------------------------------------|---------------------------------------|-----------------------------------|---------------------------------------|----------------------------------------|
| School Group | o Tours (only): | | | | Museum Use Only |
| | | | | | AHMA/split PHMC/split |
| # Students | | x \$5.00 | | | |
| # Adults | | x \$5.00 | \$ | | / |
| # Complimentary Educators _ | | | | То | tal: \$ |
| (I.e. Teachers, ES school tour is con | S, interns, aids, and mplimentary. Pleas | chaperones: 1 re e see teacher and | esponsible adul chaperone resp | t per 10 paid st consibilities fly | udents for a guided er.) |
| ****** | ***** | ****** | ***** | ***** | ****** |
| ****** | ****** | ****** | ****** | ****** | ******* |
| General Grou | ip Tours: (not s | chool groups | s) | | Museum Use Only MA/split PHMC/split |
| # Guests | | x \$5.50 | \$ | | _/ |
| The Museum will a | ccept CASH, CREDIT | Γ CARD, or a CHE | CK made payable | e to the <i>Anthrac</i> | cite Heritage Museum. |
| AMOUNT REG | CEIVED \$ | | _ Cash □ | Check \square | Credit Card |
| GRADE _ | | | | | |
| GROUP _ | | | | | |
| CONTACT | | | | | |
| ADDRESS _ | | | | | |
| CITY | | | | STATE _ | ZIP |
| TELEPHONE _ | | | | | |
| Signature _ | | | | | |

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