

## **School Group Tour Request Form**

Please fill out this form to request a guided tour at the Ziibiwing Center

Date request subr				
Teacher / Contact	Person:			
School Name:				
School Address:	``	E-t-u-t-u-t	E	
<u>Telephone: (</u>	_)	Extension:	Fax:_(	)
Email address:	Crada	A ~~	# of to a ale and	
<u># of students:</u>	Grade:	Age range:	# of teachers	s / chaperones:
Areas interested in: I would like a		Tour of Diba Jimooyu Tour of Changing Exi Scavenger Hunt Culture kit presentatio Song & Dance Preser Research Center Craft activity Games/Coloring page Video Special Event Other:	hibit – subject to avail on atation	
<ul> <li>Interpretive tour (times vary, depending on group)</li> <li>Self – guided tour (without docent)</li> </ul> Tours are available Monday through Saturday from 10:00 am to 5:00 pm				
Preferred Date of visit:			<b>Preferred Tim</b>	ne of visit:
1 <sup>st</sup> choice				
2 <sup>nd</sup> choice				
Will the group require accommodations for lunch (catering needs)? $\Box$ Yes $\Box$ No				
Are there any special needs requirements (wheelchairs, strollers, etc.)?				

If you must cancel or change this request / reservation, please contact the Sales & Events Coordinator at 989-775-4744.

## Mail, email, or fax the completed form to:

Sales & Events Coordinator Ziibiwing Center 6650 E. Broadway Mt. Pleasant, MI 48858 FAX: 989-775-4770

This form is also available online at www.sagchip.org/Ziibiwing/downloads.htm