



Community Outreach Program Request Form

Today's Date: _____

Organization/Group Name: _____

Group Leader/Contact: _____

Email: _____ Phone: _____

Address: _____

City: _____ Zip: _____ County: _____

Program Location and Physical Address (if different from above): _____

1st Choice Date: _____ Time(s): _____

2nd Choice Date: _____ Time(s): _____

Estimated Number of Participants: _____

Describe program participants (children, adults, families, student group, ages of children, etc.), including any special needs that the outreach educator should be aware:

How did you hear about MNCH Outreach Programs?

Program Request:

- Oregon Rocks!
- Engineer It! Exploring Ancient Technologies
- Move Like a Mammoth
- Other: _____

Additional Comments: _____

Cost: Program fee for a Family Library Program is \$95 plus travel expenses (mileage outside of the Eugene/Springfield area at \$0.535/mile and additional costs when an overnight stay required). Other types of community outreach program fees are determined based on specific requests.

Send completed form to: Outreach Program

Email: mnchoutreach@uoregon.edu Fax: 541-346-5334 Phone: 541-346-5019

Museum of Natural & Cultural History, 1224 University of Oregon, Eugene, OR 97403-1224

OFFICE USE ONLY: Scheduling Email: _____ Confirmation: _____ Calendars: _____ Scholarship Log: _____ Invoice Sent: _____ Invoice Paid: _____ TAM: _____ Motorpool: _____ Reminder: _____ Survey: _____	Fee: _____ Mileage: _____ Lodging: _____ Total: _____
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