GROUP TOURS
Reservation Form

Group name: ________________________________________________________________

Group leader: ______________________________________________________________

Email: __________________________________________ Phone: ______________________

Address: __________________________________________________________________

City: ____________________________ Zip: ___________ County: ________________

Have you visited the museum before? ☐ Yes ☐ No

Expected Number of Participants: ________ Age Level: ________ Length of visit: ________

First Choice Date: ____________________________ Time: ______________

Second Choice Date: ____________________________ Time: ______________

Program Options: (choose one for your age level)

5 – 8 year olds
☐ Storm Boy
☐ Fun with Fossils
☐ Camas Oven

9 – 11 year olds
☐ Oregon Archaeology Detectives
☐ Fossil, Fact or Fiction?

12 year olds and up
☐ Cultural Scene Investigation

Featured Exhibits: (for all ages)
☐ Site Seeing: Snapshots of Historical Archaeology in Oregon
☐ Atlas of Yellowstone (opens April 4, 2014)

Do any participants have any special needs of which Museum staff/volunteers should be aware?

List any educational goals or subjects of interest:

Send completed form to:
Email: mnhtours@uoregon.edu
Fax: 541-346-5334  Office: 541-346-1694
Museum of Natural & Cultural History
Attn: Education Coordinator
1224 University of Oregon, Eugene, OR 97403-1224

OFFICE USE ONLY:
Confirmation sent: ______________________
Calendars: ______________________
Reminder email: ______________________
Survey email sent: ______________________