

# NORTH LAKELAND DISCOVERY FIELD TRIP RESERVATION FORM

School Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Email: \_\_\_\_\_

School Phone: \_\_\_\_\_ School Fax: \_\_\_\_\_

Best time to call (school): \_\_\_\_\_ (home): \_\_\_\_\_

Preferred dates of NLDC Visit: 1<sup>st</sup> \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ 3<sup>rd</sup> \_\_\_\_\_

Grade/Age of Students: \_\_\_\_\_ # of Students: \_\_\_\_\_

What is the earliest time you would be arriving to NLDC? \_\_\_\_\_

What is the latest time would you need to depart NLDC? \_\_\_\_\_

Are there any students or adults with special needs? If so, please describe.

The number of classes your students can participate in during their visit will depend on the length of your visit to NLDC and the number of participating students. Below, please list your top six class choices in order of preference.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

We will do our best to help ensure you receive your top class choices. Upon completion and return of this form, a Discovery Center staff member will contact you and discuss an appropriate field trip itinerary.

**Questions? Refer to the Program Planner or contact:**

schools@discoverycenter.net  
715.543.2085

**Please fax or mail this completed form to:**

North Lakeland Discovery Center  
c/o Environmental Educator Coordinator  
PO Box 237 Manitowish Waters, WI 54545  
715.543.8982