ANCHORAGE MUSEUM

PM/AM OVERNIGHTS AT THE MUSEUM

OVERNIGHT REQUEST FORM

To request a PM/AM Overnight reservation, please fill out the following form and submit it to <u>overnights@anchoragemuseum.org</u>. Overnights are based on staff and space availability, so please submit a selection of potential dates. Please review the PM/AM FAQ on our website. Once submitted, the overnight coordinator will be in contact within 5-7 business days. If you have any questions, send an email to the above address (preferred), or call 907-929-9261.

PM/AM prices for scheduled groups are \$75 per student and free for every chaperone within the 1:5 ratio. Any chaperones over the ratio will pay the full price of \$75 per person.

There is a one chaperone per five children ratio (1:5). Chaperones must be over the age of 18 and be responsible for the direct supervision of those in his or her group. Chaperones within the ratio do not pay admission, but any chaperones over 1:5 pay the full price of \$75.

To reserve the date of your overnight, you will need to pay a deposit of \$500. This will be refundable up to 30 days before the intended date of the overnight but will not be refunded after that point in time. The remainder will be paid the day of the scheduled overnight program.

I UNDERSTAND THAT SUBMITTING THIS FORM DOES NOT GUARANTEE MY VISIT.

GROUP LEADER INFORMATION

	SCHOOL/ORGANIZATION		
	GROUP LEADER'S NAME		
	PHONE NUMBER		
	EMAIL ADDRESS		
	ALTERNATE CONTACT NAME		
	ALTERNATE CONTACT PHONE OR EMAIL		
OVER	NIGHT INFORMATION		
	PERFERRED DATE OF ARRIVAL		(MM/DD/YY)
	2 nd CHOICE DATE		(MM/DD/YY)
	3 rd CHOICE DATE		(MM/DD/YY)
	TOTAL # OF STUDENTS	_ (MAX. 40) GRADE LEVEL(S)	
	TOTAL NUMBER OF ADULTS		(1:5 RATIO)

BILLING INFORMATION

SCHOOL/ORGANIZATION		
CONTACT NAME		
STREET ADDRESS		
CITY, STATE, ZIP CODE		
PHONE NUMBER		
EMAIL ADDRESS		
ORGANIZATION TAX ID #		
ADDITIONAL INFORMATION		
TRANSPORTATION		
PARKING REQUESTED	(YES/NO)	

Please note any medical or special accommodations in the space below.