

Field Trip Reservation Form

R.W. Norton Art Gallery
4747 Creswell Avenue
www.rwnaf.org
Shreveport, LA 71106

Today's Date: _____

318-865-4201 - phone
318-869-0435 - fax
anm@rwnaf.org

Your Name	Telephone Number
Group Name	Fax Number
Group Address	E-mail Address
Number in Group - Total, # of Chaperones	Grades, Ages

When would you like to visit the museum? _____
(Day of the Week) (Month/Day/Year)

What TIME would you like to arrive at the museum? _____ Depart? _____

Self-Guided Visit

Docent-Lead Tour

T.E.A.M. Event

Which program? _____

Special Requests:

i.e. Picnic request,
additional details
or mailings, large
group requests,
etc.

Confirmation Letter Checklist

Confirmation Letter

iCal calendar

Intranet Calendar

**Enter into Tour Database
Excel File**

Email Jen, Emily

**Going outside?
Email, call Gerry, Jimmy**

If necessary, inform Mike

**If necessary, reprint monthly
staff calendar**

Confirmation Packet Checklist

Confirmation Letter

Name Tags for Students

Bus Driver Directions

Chaperone Checklist/Guide

Museum Map brochure

Rules brochure

Field Trip Procedures Guide