

**Rahr-West Art Museum
Tour Request Form**

Phone: 920-683-4501

Fax: 920-683-5047

Contact Date: _____ **Tour Date:** _____
(Day and Month/Date/Year)

Time: _____
Please indicate length of time - We recommend at least one hour

Tour Group/School/Organization: _____
(Name)

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

e-mail: _____

Contact Person: _____

Title: _____ Phone: _____

Size of Group: _____ Age of Group: _____

Special Needs: _____

Docent required? (Please Circle) **Yes** **No**

Tour Emphasis: (Circle) Art Galleries Current Exhibit Mansion

Comments: _____

Itinerary: _____

Reservation Requirements and General Information:

Guided Tours: Completed form returned (for Bus Tour Groups), 2 to 3 weeks in advance.

Fees: No museum admission fee, donations gratefully accepted. For commercial organizations there is a \$10.00 registration fee (per each bus) payable in advance with your reservation. For Non-profit/Educational institutions this fee is waived.

Cancellations: Please call at least 48 hours in advance.

Length of Visit: Tours last approximately 1 hour or as arranged.

Size of Group: Limited to 50 people. Educational Groups require 1 adult per 10 students.

Museum Hours: Mon, Tue, Thur, & Fri 10 AM to 4 PM; Wed - 10 AM to 8 PM; Sat & Sun - 11 AM to 4 PM ~ Closed Holidays

Confirmation Letter:	Sent: _____ date	Received: _____ date	Payment Received: Yes No
			Check No. _____ Amount: _____
Docents called and confirmed: (if yes) - Name:	(Circle one) Yes/No	Date: _____	Phone no: _____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

For Museum Use Only