|  |  |
| --- | --- |
| **Group name:** |  |
| **Contact name:** |  |
| **Contact telephone number:** |  |
| **Address:** |  |
| **School:** |  |
| **Email:** |  |
| **Columbia University affiliation:** |  |
| **Arrival Method:**  |  |
| **Tour Date Requested:** |  |
| **Requested Length of Tour:** |  |
| **Is Lunch requested?** (Lunch in the Lamont cafeteria may be available for purchase – *with notice)* | **Yes ⬜ No ⬜** |
| **Number of participants:**  |  |
| **Age group:** |  |
| **Is the tour for a class?** | **Yes ⬜ No ⬜** |
| **If so, please specify which class:** |  |
| **Budget for tour:** |  |