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DANIEL'S STORY GROUP RESERVATION AND PROGRAM APPLICATION

APPLICATION PROCESS

Please read carefully, print neatly, and fill out all appropriate sections. Incomplete applications will result in delayed processing.

- 1 All applications are booked on a first-come, first-served basis.
- 1 All programs are subject to staff and space availability.
- 1 A letter of confirmation and a teacher guide to the exhibition will be sent within three weeks of receipt of an application.

HOW TO USE THIS FORM

- 1 Please complete Sections A and B.
- 1 Please complete Section B by referring to the program information in the section of this brochure entitled *Remember the Children: Daniel's Story*.

Completed applications may be sent to

Group Scheduling
United States Holocaust Memorial Museum
100 Raoul Wallenberg Place, SW
Washington, DC 20024-2126

or faxed to (202) 488-2606

Questions? Call (202) 488-6198
or go to group-visit@ushmm.org

A SCHOOL/GROUP CONTACT INFORMATION

School/group name _____

Contact first name _____ Contact last name _____

School/group address _____

City _____ State _____ Zip code _____

Contact phone number _____ Extension _____

Contact fax number _____

E-mail _____

CHAPERONE REQUIREMENT CHART

Students	Adults	Students	Adults
1-7	1	36-42	6
8-14	2	43-49	7
15-21	3	50-56	8
22-28	4	57-63	9
29-35	5		

Number of students in group (high school age or younger) _____

Number of adults in group (1 adult:7 students) _____

B PROGRAM SELECTION

Please list your top two program choices below. Be sure to include the program title, month, date, year, and time.

1st choice

Program title _____

Date (mm/dd/yyyy) _____

Time _____

2nd choice

Program title _____

Date (mm/dd/yyyy) _____

Time _____

FOR INTERNAL USE ONLY

PE#	DATE	TIME
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COMMENTS



Please open for application form.



Remember the Children: Daniel's Story—Group Reservation and Program Application

