



SCHOOL TOUR BOOKING FORM

TO:

BERINGIA INTERPRETIVE CENTRE

PO BOX 2703

WHITEHORSE, YT Y1A 2C6

PHONE: (867) 667-8855

FAX: (867) 667-8854

Email: beringia@gov.yk.ca

SCHOOL: _____

ADDRESS: _____

PHONE: _____ FAX: _____ EMAIL: _____

TEACHER RESPONSIBLE: _____

PHONE NUMBER: _____ EMAIL: _____

PREFERRED DAY OF VISIT: _____

TIME OF ARRIVAL: _____

LENGTH OF TIME AVAILABLE FOR VISIT: _____

NUMBER OF STUDENTS: _____ GRADE: _____

NUMBER OF SUPERVISORS (must be age 19 or older): _____

AREA OF STUDY: _____

COSTS: \$ 4 per student. Teachers and escorts are free.

For payments under \$100, credit card, cash or cheque is required.

FOR OFFICE USE: booking taken by _____ on _____;
Fee quoted: _____, payment method (pls circle): Credit Card - Cash - Cheque - Invoice;
staff scheduled to work: _____ actual number of visitors: _____;
Fee charged/invoiced: _____, rung in as (pls circle): Students- IOU/to be invoiced - other:
_____ invoice sent on _____ by _____