FIELD TRIP RESERVATION FORM
Racine Zoo
200 Goold Street Racine, WI 53402
Education Department Phone: 262-636-9580
Fax: 262-636-9307
www.racinezoo.org education@racinezoo.org

Date of Arrival: ____________ Time of arrival: ________ Departure time from Zoo: ________

Name of School/Organization: ______________________________________________________

Street Address: ___________________________________________________________________

City: ___________________________ State: __________ Zip Code: _________________________

Contact Person: ____________________________

Contact Phone Number: ________________ ext: ______ Fax Number: ______________________

Contact Email Address: __________________________

Group Description (age/number): 2 & Younger: ____________________________ Child: ____________
                                      Adult: __________________________ Senior: ________________

Will you be eating lunch at the Zoo?  Yes  No
**Bagged lunches are permitted and picnic tables are located throughout the Zoo
**Are you interested in our boxed lunches- available for pre-order from Max and Jenny’s Jungle Grill? __________

Are there any special needs or concerns we should know about your group?
____________________________________________________________________

Will you be letting your students enter the Gift Shop? __________

Would you like to purchase tickets for the Zoo Choo Express?  Yes  No
    If yes, how many tickets? ____________ ($3.00/person weather permitting)

Are you interested in more information about our Education Programs? __________

CED USE ONLY
Final Count Due: ___________

# of Students ________ X $ ________/student  Total: $ ___________

# of FREE Chaperones ________ 1/8 students  Total: FREE

# of Extra Chaperones ________ X $ ________/Chaperone  Total: $ ________

Extras: __________________________________________  Total: $ ________

Total # of People ____________ Total Cost: $ ____________

Invoice Sent: ____________ Date: ____________

Pay ADMISSIONS ____________ Pay EDUCATION ____________

Program Time: ____________________ Program location: ____________________

FIELD TRIIP RATES
November-March: $2.00
April-October: $4.00

EDUCATION PROGRAM RATES
Year Round: $8.00

ADMISSION USE ONLY
2 & Younger: ____________  Child: ____________  Adult: ____________  Senior: ____________

Total Amount Received: $ ____________ (if applicable)

Last Updated May 2017