

## GROUP RESERVATION REQUEST FORM

Tour Date Requested \_\_\_\_\_ Entry Time Requested \_\_\_\_\_

Group Name/Organization \_\_\_\_\_

Type of Organization (School, Church, Corporate, etc.) \_\_\_\_\_

Contact Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

E-mail Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Number in Tour \_\_\_\_\_ Type of Tickets (Child, Youth, Adult, Senior, etc.) \_\_\_\_\_

Questions/Comments:

### FOR K-12 SCHOOL FIELD TRIPS ONLY

Number of Students \_\_\_\_\_

Number of Required Chaperones (1 per 10 students) \_\_\_\_\_

Number of Additional Chaperones (\$10 per person) \_\_\_\_\_

Grade Level(s) of Students \_\_\_\_\_

### TO SUBMIT

**Mail:** George W. Bush Presidential Library and Museum  
Attn: Visitor Services Coordinator  
2943 SMU Boulevard  
Dallas, TX 75205

**Email:** [Bush43Visitors@nara.gov](mailto:Bush43Visitors@nara.gov)

**Fax:** (214) 346-1699

**Attn:** Visitor Services Coordinator



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