

When completing this form, please print clearly.

School Name Grade

Lead Teacher Phone Number

Mailing Address Line 1

Mailing Address Line 2

City, State, Zip

Number of Students _____

Number of Chaperones/Teachers _____

Total person count _____ x \$4.00 per person = \$ _____

Please remember that we're open for field trips from May through October and you may arrive at the Seashore Trolley Museum anywhere between 9:30 a.m. to 2:00 p.m.

Desired Date

Desired Arrival Time

Alternate Date

Alternate Arrival Time

Do you have any special concerns or requests that we should be made aware of?

Please mail this completed reservation form to:

Seashore Trolley Museum
P.O. Box A
Kennebunkport, ME 04046-1690