

EDUCATIONAL EVENT REQUEST FORM

Date & Times of Potential Presentation: _____

Contact Information:

Name: _____ School/Organization: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email Address: _____

*This is where invoice will be sent *Programs at locations outside of the Phoenix area may have an additional fee

Physical Address of Presentation (If Different Than Information Above): _____

Step 1: Choose the location you would like: *(only one please)*

- Field trip to the PHS facility *(Skip Step 2; go to Step 3)*
- Presentation at the PHS facility *(Go to Step 2)*
- Off-Site Presentation *(at your school/organization) (Go to Step 2)*

Step 2: Choose the presentation you would like: *(only one please)*

- Desert Wildlife & Safety
- Around the World in 8 Herps
- Food Chains & Food Webs
- Alligators & Adaptations
- Scout Badges: Girl or Boy Scouts? Badge Name: _____
- Other: _____
- H.E.R.P.
- Reptile Club
- I don't know
- Professional Development Workshop

PHS Office Use Only:	
Total Cost:	_____
Show Boxes/Notes:	_____

Date Confirmation Sent?	_____
Date Invoice Sent?	_____

Step 3: Describe details regarding presentations.

How many presentations? *(Circle one)* 1 2 3 4 Number of students per presentation? _____

How many adults/chaperones will be participating in each presentation? _____

Circle all age level(s) that will participate in the presentation(s):

Preschool K 1 2 3 4 5 6 7 8 9 10 11 12 Adult

Any special driving, parking, or check-in instructions at your school? _____

Will there be any special needs participants at the presentation? If so, what are the suggested accommodations? _____

Any other requests or comments? _____

Please submit this request & any questions to the PHS Education Director,
Crystie Baker: crystie@phoenixherp.com

Conserve. Learn. Discover.

