

(Please mark all that apply)

We are...Eating by...

___ Bringing lunches

___ Ridley's lunch

___ Ridley's Supper

**William P. Ridley 4-H Center
Environmental Education Program
Schedule Confirmation Form**

I have returned/attached/mailed:

___ Copy of the Government
Certificate of Tax Exemption for
my School.

Cost per person: _____

Please return this confirmation form, A.S.A.P. The actual confirmation of your date occurs once the 4-H Center receives your schedule confirmation form and tax exemption certificate. **DO NOT bring payment on the day of your visit. You will receive an invoice after your visit, for BOTH students/adults.**

Date of Visit _____ Grade Level _____

Name of School _____ # of classrooms _____

School Address _____ County _____

_____ Phone _____

Principal _____ Email _____

Coordinating Teacher _____

Email _____ Cell Phone _____

Method of Travel _____ Arrival Time _____ Departure Time _____

Total Participants (if unsure, please give an estimation) ***Note—In order to plan and prepare for your visit, please notify the 4-H Center an updated number of participants that you will have seven days prior to your arrival.**

Students: Male _____ Female _____ **Total Students:** _____

Parents: Male _____ Female _____ **Teachers:** Male _____ Female _____

Groups of less than 120 may be required to share the facilities with another group.

Special Needs/ Allergies/ Diet requirements:

Email Invoice to _____

**** DO NOT bring payment on the day of your visit. You will receive an invoice after your visit.**