

Smithsonian Institution Self-Guided Group Visit Registration Form

Thank you for visiting the Smithsonian Institution! Please complete this form and return it to the Information Desk before proceeding.

Name of (Group:				
Group Zij	o Code:				
(You will	·	ed in case of an	emergency si	tuation during your visit)	
Total Nur	nber of Group P	articipants:	Nur	nber of Chaperones:	
Group Ty	pe:				
	Stu	ident/Youth	Adult	SeniorOther	
	I	f student/youth	, what grade(s):	
Date and	Arrival Time:				
What is th	ne purpose of yo	our visit today?			
		School Trip _	Recre	ationVacation	
		_Other – Pleas	e specify:		
Please che	eck one of the fo	llowing that be	st describes y	our group:	
Adu Hav War The	directed/ no ag th directed e a list of thing nt to see specific matic (explorin t cafeteria/bath	s to see/find in c exhibitions in g a theme throu	the museum	ultiple sites in DC)	
How long	will you be in V	Vashington, DC	?		
1 day	2 days	3 days	4 days	5 or more days	

What other Smithsonian museums do you intend to visit/have visited during your stay in Washington, DC?

We have already visited:

We intend to visit:

What are some of the other sites you will visit while in Washington, DC?

Are you interested in receiving information about Smithsonian education programs? Yes No Email address: _____

In order to improve future visits, may we contact you about your experience today?

Yes No

For Office Use Only: Arrival Entrance _____

02/18/09