



Touchstones Nelson
Museum of Art and History

Tour Booking Form

Day & Date of Tour:		Booked by:
Start and End Time:		Date:
		Responded to by:
		Please initial any changes to original booking
School/Group:	Contact Person:	
Phone:	Email:	
Expected Number of Children:	Actual number of students on arrival:	
Grade/Ages:		
Tour Type: (check all that apply) <input type="checkbox"/> General PME tour <input type="checkbox"/> Archives Tour (Wed. Only) <input type="checkbox"/> Gallery A & B <input type="checkbox"/> Self Guided (No docent required)		
Additional Notes or Special Requests:		
Names of Assigned Docents:		
Price per student: <input type="checkbox"/> \$3 <input type="checkbox"/> Other (explain) (teachers and chaperones are free)	<input type="checkbox"/> Paid upon arrival <input type="checkbox"/> Invoice mailed. Date: _____ <input type="checkbox"/> Invoice paid. Date: _____	

For more information please contact:

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