



LIVING HISTORY

SCHOOL AND YOUTH GROUP SELF-GUIDED VISITS

2020 BOOKING FORM & INVOICE - The Park is open from 10:00- 5:00
please note that we will **not** be accepting bookings for **June 4TH, 2020** (School Patrol Day)

Name of School/Group: _____

Address of School/Group: _____

Phone #: _____ Fax #: _____

Supervisor's name: _____ E-mail: _____

Attendance Date: _____ Time of Arrival: _____ gate opens @ 9:30 for groups in May/June only

Bus

Carpooling

Transit/ Walking

Buses are exempt of payment & required to park in Lot D. A parking fee will apply when carpooling or arriving separately.

Please provide an estimate. Numbers will be adjusted at the gate on the day of your field trip. Admission includes all rides. Teachers are considered supervisors and are to be part of the adult supervisor ratio.

_____ # of Children under 3 years (free of charge)

_____ # of Children (ECS) X \$11.55 each (includes GST) \$ _____

_____ # of Adult Supervisors (no charge) Ratio: 1 supervisor / 5 children

_____ # of Children (Gr 1-3) X \$11.55 each (includes GST) \$ _____

_____ # of Adult Supervisors (no charge) Ratio: 1 supervisor / 8 children

_____ # of Children (Gr 4+) X \$11.55 each (includes GST) \$ _____

_____ # of Adult Supervisors (no charge) Ratio: 1 supervisor / 10 children

_____ # of Special Need Children X \$11.55 each (includes GST) \$ _____

_____ # of Educational Assistant (no charge) Ratio: 1 assistant / child

_____ # of additional Adults X \$11.55 each (includes GST) \$ _____

_____ # of Tasty Treats X \$3.41 each (includes GST) \$ _____

(Choice of 2 cookies, 1 ice cream cone, 1 popcorn or 1 candy floss)

GST @ 5% has been added (#R118956457)

TOTAL PAYMENT DUE \$ _____

Payment is to be made at the gate only on the day of your field trip. This will allow for any adjustments to the number of students and paying adult supervisors present that day. Our gate staff will accept payment by cash, credit card, and cheque and will be able to issue an itemized receipt.

As the person in charge of this booking, I _____ will ensure that the children are accompanied by an adult at all times while visiting Heritage Park.

Signature _____ Date _____

On-site contact information: Name _____ Cell # _____

This contact information will be used in case of lost child or severe weather warning.

Return by fax to (403) 268-8574 or email to schools@heritagepark.ca at least 1 week prior to your visit.