

On-Campus Scout Program

Booking Sheet



Troop/Pack Number:		Scout Level(s):	
Date of Program:	Arrival Time:	Departure Time:	

Contact Information

First Name: _____ Last Name: _____

Phone #: _____ E-Mail: _____

Address: _____ City: _____ State: _____ Zip: _____

Program Information

Program Name (See website for options): _____

Program Start Time: _____ Special needs or concerns: _____

Number of Scouts (\$18 each): _____ Number of Chaperones (first free, additional \$8 each): _____

Please note there is a minimum payment of \$180 per program.

Add-Ons

Racine Zoo Scout Program Patch
\$10/each
Number of Patches: _____

OFFICE USE ONLY

of Scouts: _____ x \$18 = \$ _____

of Additional Chaperones (first is free): _____ x \$8 = \$ _____

of Patches: _____ x \$10 = \$ _____

Total Program Cost: \$ _____

Final Count & 50% Deposit Due: _____ Added to Calendar on _____ by _____

Invoice created on _____ by _____ Invoice sent on _____ by _____

To discuss your reservation, please contact the Racine Zoo Conservation Education Department at **262-636-9580** or **education@racinezoo.org**.