

Today's Date: _____

Order# _____

WA School Group Booking 2008

Arrival Date: _____ Arrival Date: _____ Arrival Time: _____ am/pm

School Name: _____

Grade(s) or Program: _____

Contact: _____

Address: _____

City, State, Zip: _____

Phone: _____ Cell Phone: _____

Fax: _____ Email: _____

Form of Payment: (Check all that apply)

School Check ___ Cash ___ Credit Card ___ Unsure ___

Tax Exempt (yes/no) _____ County _____

If yes, please explain that school must provide Wild Adventures with a copy of the schools Georgia State ST-5 form, accompanied by a purchase order. Payment must be made with a check from the schools General Fund. Any other payment type must be taxed.

PRICING

School Adventure: \$19.00 (\$20.33 w/ tax) _____

Summer School: \$30.00 (\$32.10 w/ tax) _____

Either package above includes free admission tickets for teachers with School ID's and for School/Charter bus drivers.

Estimated # Teachers _____

Estimated # Bus Drivers _____

SCHOOL GROUP BUFFET

_____ School Buffett (includes chicken tenders, hot dogs, potato chips, ice cream cups, and unlimited soft drinks) \$6.50 + tax (\$6.96)

Meals must be reserved and guaranteed at least 5 days prior to visit