

art expands minds  
art changes lives  
visit the museum  
experience art  
a world of art  
awaits you at the  
Museum of Art/WSU

# MUSEUM OF ART/WSU



**Tour Group Form** / museum.wsu.edu / 509-335-1910 / Office Hours: M-F, 8am-5pm

**Name of Exhibition:** \_\_\_\_\_ **Scheduler Initials:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Date of Tour:** \_\_\_\_\_ **Day of Tour:** \_\_\_\_\_ **Time in MOA from:** \_\_\_\_\_ **To:** \_\_\_\_\_

**Number in Group:** \_\_\_\_\_ **Number of Chaperones:** \_\_\_\_\_

**Recommended Chaperones for each age group below:**

<b>PreK/K</b>	1 adult per 2 children	<b>Grades: 1-2</b>	1 adult per 6 children
<b>Grades: 3-8</b>	1 adult per 10 children	<b>Grades: 9-12</b>	1 adult per 15 children

**Complete section below appropriate to tour group you will be bringing to the Museum of Art/WSU**

**Pullman School**

School name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Grade level(s): \_\_\_\_\_  
Teacher: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Travel by: \_\_\_\_\_

**Other Group (Not WSU or Pullman school)**

Organization/School name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Grade level(s): \_\_\_\_\_  
Teacher: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Travel by: \_\_\_\_\_

**Buy-A-Busload-of-Kids** No \_\_\_\_\_ Yes \_\_\_\_\_

**Please submit your invoice after tour to: Museum of Art/WSU, Associate Director, PO Box 647460, Pullman, WA99164-7460.**

In consideration for and as a condition of being allowed to participate in this voluntary activity, School District releases the state of Washington, the Regents of WSU, WSU, and subdivision or unit of WSU, its officers, employees, and agents ("WSU"), from any and all liability, claims, costs, expenses, injuries and/or losses to person or property, which may be brought against or suffered by WSU as a result of the acts or omissions of School District, or which School District may suffer or sustain, including but not limited to as a result of death or injury to its employees or students, in connection with or arising from participation in the event or related activity. Participation includes, but is not limited to, travel to and from the event in a private or public vehicle, any activity connected with the event itself, and use of state equipment or facilities for the event whether on or off WSU property.

***The representative signing on behalf of the School District acknowledges that he/she has carefully read this document and understands its contents, is fully informed about this program and circumstances, is aware that this document is a contract with WSU, and signs it freely and voluntarily on behalf of the School District.***

Signature/Responsible Party: \_\_\_\_\_ Date: \_\_\_\_\_

**URGENT! Please Fax Signed Copy Of Document Back To The Museum Of Art/WSU At: 509-335-1908**

Approved - Office of Business Affairs, March 2011

**address:** Fine Arts Center, rm 6077, PO Box 647460, Pullman, WA 99164-7460 / **phone:** 509-335-1910 / **web:** museum.wsu.edu