



Educational Pass - Retain this side or copy for Museum

This pass is provided for educators and their students who attend the Museum to fulfill a class requirement. Educators must provide the following information and give a copy of the pass to all students who will need access.

Educator Name: _____

Institution: _____

Address: _____

City, State, Zip: _____

Email: _____

Phone: _____ Educational Level(s) _____

Course Name: _____

Dates: _____

Please indicate a range if applicable. i.e. Jan 1 - May 1, 2017

Educator Signature: _____

Please add me to your email list.