



**LIED DISCOVERY CHILDREN'S MUSEUM  
FAX IT BACK - RESERVATION FORM**

To: Group Reservations  
Lied Discovery Children's Museum  
833 Las Vegas Blvd. North  
Las Vegas, NV 89101

Fax: (702) 382-0592

Phone: (702) 382-3445

Today's Date: \_\_\_\_\_

Contact: \_\_\_\_\_

School: \_\_\_\_\_

Address: \_\_\_\_\_ City & State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ (school) \_\_\_\_\_ (alternate)

Email: \_\_\_\_\_

Fax: \_\_\_\_\_

I would like to schedule a visit to the Museum for my group on:

1st Choice

Day and Date: \_\_\_\_\_

Time: \_\_\_\_\_

Number of Students: \_\_\_\_\_ Number of Adults: \_\_\_\_\_

Age and Grade Level: \_\_\_\_\_

2nd Choice

Day and Date: \_\_\_\_\_

Time: \_\_\_\_\_

Number of Students: \_\_\_\_\_ Number of Adults: \_\_\_\_\_

Age and Grade Level: \_\_\_\_\_

I am interested in the following special areas or presentations:

Stuffed Demonstration \_\_\_\_\_

Desert Discovery \_\_\_\_\_  
(for children 5 and younger)

Requesting Lunch Space:  yes  no If yes, list preferred time: \_\_\_\_\_

***The Reservationist will contact you upon receiving your fax. Reservations are not final until confirmation process is complete and you have received your confirmation form.***

My best method of contact is:  phone  email

The best time to reach me is: \_\_\_\_\_