



HOUSE CALLS – A Health Science Educational Outreach Program FAX IT BACK - RESERVATION FORM

To: Outreach Department
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 House Calls to come to my school on:

1st Choice

Day of Week: _____

School Start Time: _____

Number of Students: _____ Number of Classes: _____

Age and Grade Level: _____

2nd Choice

Day of Week: _____

School Start Time: _____

Number of Students: _____ Number of Classes: _____

Age and Grade Level: _____

You will be contacted upon receiving your fax. Reservations are not final until confirmation process is complete and you have received your confirmation form via email or fax.

Please allow 48 hour response time as we may be out at a school teaching HOUSE CALLS programs during the day.

My best method of contact is: ___ phone ___ email
(if phone, please give evening number also _____)

The best time to reach me is: _____