**General Visit: Group Reservation Form**

Date:

Arrival Time:

Leave Time:

Type and number of vehicles: bus

car

van \_

Number of Participants: Reason for visit: (*Check all that apply below*)

Age Level

*Interpretive Center in small groups (max. 10 at a time) Orientation Comm. Hill Salal Hill*

*Cobble Beach/Tidepools Quarry Cove Other*

Description:

Special Requests / Comments:

Group Name:

Leader /Coordinator Name: Address:

Phone #: ( ) Cell ( )

Email:

# Send completed form to: blm\_or\_yh\_education@blm.gov or fax to 541-574-3140

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# For office use only:

*Registration received*: / /

*Initials*:

*Confirmation*: / /

*Initials*:

*Waive entrance fee?*

*Yes*

*No*

*To be determined*

***ASSIGNED CONTACT / ORIENTATION RANGER*:**

*Special Instructions*:

*Ranger Comments/Evaluation*:

*Revised – 5/28/2015*