



Organization Information:

Organization/School Name: _____

Address: _____

Phone Number: _____ Fax Number: _____

Website: _____

Field Trip Organizer Contact Information:

Name: _____

Title: _____

Email: _____

Office Phone: _____

Mobile/ Cell Phone*: _____ Are we able to text you? Yes or No

*Or any phone number where you can be reached the day of the event.

Requested Date and Time: (Tuesdays or Thursdays only)

Chose from 10am- 12pm or 12m- 2pm or 2pm- 4pm

1st Choice Date: _____ Time: _____

2nd Choice Date: _____ Time: _____

3rd Choice Date: _____ Time: _____

Number of Student Participants: _____

Age/Grade of Student Participants: _____

Number of Adult Participants: _____

Field Trip Information and Details:

What are your service and learning goals for this event?

Are there any special needs or accommodations that City Green should be made aware of ahead of time?

Is City Green permitted to share photos we take at the event?