

Education Programs

**Nocturne Sleepover Reservation Form**

**Program Information:**

|  |  |  |
| --- | --- | --- |
| Preferred date of arrival: | | (M/D/Y) |
| 2nd choice date: | | (M/D/Y) |
| 3rd choice date: | | (M/D/Y) |
|  | | |
| Total # Students: | | (max. 65 students) |
| Total # Adults: | | (max. 15 adults) |
| Student grade level(s): | |  |
| First Program selection: | |  |
| Second Program selection: | |  |
| Program descriptions are available at [www.alaskasealife.org](http://www.alaskasealife.org).  **Cost is $65 per person March-August, $55 per person September-February**.  Minimum of 12 paying participants; one chaperone is free for every 10 students.  To complete your reservation, **a $600 deposit must be received within 30 days (or by January 15 for spring reservations)**.  **IMPORTANT:** No more than 80 people total in the sleeping area! This is a fire code, so any additional guests will be required to find other accommodations for the night. | | |
| **Lead Teacher Information:** | | |
| School/Organization: |  | |
| Lead Teacher’s name: |  | |
| Phone number: |  | |
| E-mail address: |  | |
| Alternate contact name: |  | |
| Alternate contact phone or e-mail: |  | |
| **Billing Information:** | | |
| School/Organization: |  | |
| Contact name: |  | |
| Street address: |  | |
| City, State, and Zip Code: |  | |
| Phone: |  | |
| E-mail address: |  | |
| Organization Tax ID #: |  | |
| Tax exempt? | Yes  No | |

Please complete this form and email it to [education@alaskasealife.org](mailto:education@alaskasealife.org) (preferable),

or print it out and fax it to us at (907) 224-6320.

**We will confirm your reservation via e-mail within 2-3 business days.**