

School Information

School Name: _____

Address: _____
Street Address

City Province Postal Code

School Phone Number: () _____ Contact Name: _____

Email: _____
(Board Email Address Only)

Class Information

No. of Students: _____ Start Date of Rental: _____
(First Choice)

No. of Supervisors: _____ End Date of Rental: _____
(First Choice)

Grade Level: _____ Start Date of Rental: _____
(Second Choice)

Lead Supervisor: _____ End Date of Rental: _____
(Second Choice)

Type of Box

Backus Box Activity:

- Toys and Games
- School
- Clothes
- Quill Pen Writing
- Laundry
- Quilting
- Butter Making
- All about Wool
- Lincoln Logs

Special Needs/ Additional Comments:

Cancellation/Modification Policy

The full cost of your visit as shown on your confirmation will be charged upon arrival unless you notify the museum by email or telephone of **any changes**, by 4pm the week prior to the date of your visit.