



Service • Safety • Stewardship

## **Pre-School Registration Form**

Contact Person:			
School or Group Name:			
Address:			
City:	State:	Zip:	
Phone:	Cell Phone: _		
Email:			
Requested Date and Time of Tour:			
Expected Number of Attendees: Stude	ents-	Adults	
reservations only. There will be a \$25. payable by check or money order. Can day before the reserved date. If you do business day notice, your group will be deposit money. Deposits are fully refu cancellation is made at least one (1) be	ncellations must be o not cancel your re e counted as a "no ndable upon conclu	made no less than eservation with at le show" and will then usion of your group	n one (1) business east one (1) refore forfeit all
	check or Money Ord rabbittransit 415 Zarfoss Drive York, Pa 17404	ler payable to:	
For Office Use Only:			
Date of Registration Form Received: Date Copy of Check Made: Check Returned to Group Date: Group Leader Signature and Date:		Staff Initials Staff Initials Staff Initials	