



Sandy Spring Slave Museum School Tour Request Form

Name of School _____

School Contact Name _____ Phone _____

Email _____

TOUR TIME REQUESTED

1st Choice Date _____ Time _____

2nd Choice Date _____ Time _____

GROUP INFORMATION

Age and Grade of Students _____ Number of Students _____ Number of Adults _____

Will Students Bring a Lunch to the Museum _____ (Yes/No)

ARE THERE ANY CURRICULUM SUBJECTS YOU WISH TO COVER DURING YOUR VISIT?

FOR QUESTIONS OR TO SPEAK WITH MUSEUM STAFF, PLEASE FEEL FREE TO GIVE US A CALL

WE LOOK FORWARD TO SHARING THE TREASURES AND HISTORY OF THE SANDY SPRING SLAVE MUSEUM WITH YOUR GROUP