

**Icebreaker Mackinaw Maritime Museum, Inc.**  
**2018 Educational Tour Reservation Request**

Group Name: \_\_\_\_\_

Self-booked Y/N (circle one)

If not self-booked, who is the booking agent? \_\_\_\_\_

Date of Tour: \_\_\_\_\_

Time of Tour: \_\_\_\_\_

Number of Guests:    Adult \_\_\_\_\_ @ \$ 8.00    Children \_\_\_\_\_ @ \$ 6.00

Total \$ \_\_\_\_\_

Age range of students \_\_\_\_\_    Grade \_\_\_\_\_

\*Management reserves the right to choose the tour topics to best serve the group size, ages, etc.

**Please submit this completed form in order to make your reservation.**  
**Reservations will be confirmed based on availability.**  
**Once your reservation has been accepted, this form will be signed,**  
**returned to you and serve as your confirmation.**

Company/School Name: \_\_\_\_\_

Contact Name/Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

*\*\* Cancellations made less than 3 days prior to the scheduled tour may incur a \$ 50.00 cancellation fee.*

\_\_\_\_\_  
IMMM, Inc. Representative

\_\_\_\_\_  
Date

**You may scan and email this request to [Lisa@themackinaw.org](mailto:Lisa@themackinaw.org).**