

# SCHOOL FIELD TRIP REGISTRATION FORM

Reservations - First Come, First Served Basis

Field Trip Date - (Please indicate first, second & third choice)

_____ Thursday, Feb. 7	_____ Wednesday, Feb. 13
_____ Friday, Feb. 8	_____ Thursday, Feb. 14
_____ Monday, Feb. 11	_____ Friday, Feb. 15
_____ Tuesday, Feb. 12	_____ Monday, Feb. 18

Please indicate estimated time of:

Arrival Time

Departure Time

\_\_\_\_\_

\_\_\_\_\_

Please circle appropriate grade of students:

First

Second

Third

Fourth

Fifth

Total # of students

\_\_\_\_\_

1 adult/chaperone will be admitted FREE  
with every 10 students

\_\_\_\_\_

Total # of Additional Adults/Chaperone at \$4.00

\_\_\_\_\_

Total =

\_\_\_\_\_

Please mail Reservations to:

Educational Showcase  
Florida State Fair  
P.O. Box 11766  
Tampa, FL 33680

School \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

School Telephone \_\_\_\_\_

Contact Person \_\_\_\_\_

Email Address \_\_\_\_\_

Principal's Name \_\_\_\_\_