



REQUEST FOR TOUR

Please provide the following information and you will be contacted by a member of the museum board to confirm your tour. The museum is on three levels with an elevated entrance. Please indicate how many people will need the use of the elevator.

Note: Children are to be supervised by one adult for every five children.

GROUP NAME	
CONTACT NAME	
CONTACT PHONE	
CONTACT EMAIL	
TOUR DATE	
TOUR TIME	
NUMBER IN GROUP	
NUMBER IN GROUP WHO WILL NEED THE ELEVATOR	
TYPE OF TOUR	<input type="checkbox"/> Self Guided <input type="checkbox"/> Guided

Click the SUBMIT button below to send your completed request to us electronically.

If printing and filling out by hand, please mail to the address below:
 Chisholm Trail Museum
 502 N Washington
 Wellington, KS 67152