



# Request for Waiver of Teaching Zoo and/or Planetarium Entry Fees

Use of this form and provision of the required documentation is required. Forms must be filed with the Office of the Provost AT LEAST WORKING DAYS PRIOR to the planned activity. Forms received late or without the required supporting documents will be returned.

## Organization Information

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Name:

Name of Contact:

Email:

Mailing Address:

Telephone >>  Select all that apply to your group

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Group comprised of mentally or physically disabled persons and their attendants brought by a nonprofit organization recognized by the IRS under 26 USC 501(c)(1) or (3) whose primary purpose is the improvement of the health or education of these persons. Include proof of nonprofit by attaching a copy of W K H R U R Q P K D D W G H B I W K H S X U S R V H V E L D Q W D F K L Q J W K H

Group comprised of PK-12 public school children on an authorized school activity as documented by a 6 F K R R O ' L V W U L F W \$ G V I E R R O W H U D M H R G U V Z W K H Q W X H Q W \ \ V ^ 3 I U H H D C eligibility by at least 25%. Include proof of BRL rate as calculated by the School Board Office.

Group comprised of PK-12 home-based or private school children on an authorized school activity as documented by an identifiable administrator when the education provider can document student hardship. Include appropriate proof of inability to pay (e.g. food stamp eligibility of participating students).

\* U R X S F R P S U L V H G R I F R Q I H U H Q F H D W W H Q G H H V R U G L V W L Q J X 7 K L V L V G H H P H G D V D Q R S S R U W X Q L W \ W R V K R Z F D V H W K H I D F H Y H U \ G D \ R S H U D W L R Q R I W K H S U R J U D P

Applicant Signature:

Date:

Please return this form by email to = R R 6 W D I I ] R R # V I F R O O H J H H G X ) R U **MUST BE RECEIVED** at least 7 ( 1 days prior to tour.

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OFFICE OF THE PROVOST

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