

**Four Mile Historic Park
reservation request fax form**

Please print the required information clearly
and fax this form to 720-865-0801.

❖ Teacher's full name: _____

❖ A phone number where we can reach you or leave a message: _____

❖ School's name and complete mailing address:

(name)

(street address)

(city and zip)

❖ In order of preference, please give us three dates which can potentially work for you:

1. _____

2. _____

3. _____

❖ Please tell us an approximate number of children who will be coming _____ and from how many classrooms _____. Grade level?

❖ In which program are you interested?

Traveling the Cherokee Trail _____

Winter Wonder Days _____

The Pioneer Sampler _____*

Westward Ho! _____

*If you are interested in the Pioneer Sampler please indicate the specific activities you would like your students to experience: _____

❖ If you are uncertain which program fits your needs the best or if you have questions please inform us here and we will call you with suggestions/answers: _____
