



The Antique Boat Museum
 750 Mary Street
 Clayton, NY 13624
 ph. 315.686.4104 fax 315.686.2775

GROUP TOUR

2008 BOOKING FORM

Complete this section and return AT LEAST TWO WEEKS before tour.

Group Name _____
 Contact _____ Company _____
 Street _____ City _____
 State _____ Zip _____ Phone () _____
 Date of Tour _____ Self-Guided _____ OR With Museum Docent _____
 Start time _____ End time _____
 Arriving by _____ Bus _____ Vessel _____ Vessel Name _____
 Number of _____ Adults _____ Students/Children _____
 _____ Complimentary (children under 5, bus driver + group leader)

Cancellations MUST be received at least 48 hours prior to tour or the deposit will be forfeited.

A minimum of 10 is required to book a group tour.

Booking forms must be accompanied by a \$50.00 deposit.

To be completed by Museum.

Docent _____ Phone _____ Confirmed? _____
 Docent _____ Phone _____ Confirmed? _____
 Notes _____

To be completed on arrival.

_____ @\$13.00/adult \$ _____
 _____ @\$7.50/child/student \$ _____
 _____ Less Deposit \$ 50.00
 _____ Total \$ _____
 _____ Paid On Arrival _____ To Be Invoiced _____ Other _____
 Signature of group leader _____

DISTRIBUTION _____ Schedule _____ Education _____ Accounts _____