



Antique Boat Museum
 750 Mary Street
 Clayton, NY 13624
 315.686.4104 fax: 315.686.2775 abm.org

GROUP TOUR

2010 Booking Form

Complete this section and return AT LEAST TWO WEEKS prior to tour

Group Name: _____

Contact: _____ Company: _____

Street: _____ City: _____

State: _____ Zip: _____ Phone: _____

e-mail: _____

Date of Tour: _____ Self-Guided: _____ or Museum Docent: _____

Start Time: _____ End Time: _____

Arriving by: _____ Bus _____ Car _____ Vessel (Vessel Name _____)

Number of _____ Adults _____ Students/Children _____ Complimentary (children under 5, bus driver and group leader)

- ✓ **Cancellation 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 deposit.**

To be completed by Museum

Docent: _____ Phone: _____ Confirmed? _____

Docent: _____ Phone: _____ Confirmed? _____

Notes: _____

To be completed on Arrival

| | |
|--|-------------|
| _____ @ \$10/adult | \$ _____ |
| _____ Less Deposit | \$ 50 _____ |
| Total Due | \$ _____ |
| ___ paid on arrival ___ to be invoiced | |

Signature of group leader: _____