

# Reduced Group Rate Application Form



Madison Children's Museum is able to provide subsidized admission to schools and other groups who qualify for assistance. Please complete this form to assist us in determining your group's eligibility. *Do not send your payment until you have been notified regarding your group's eligibility for a subsidy.*

**Please return completed forms by email, fax, or postal mail:**

registration@madisonchildrensmuseum.org  
(608)268-1398 (fax)

Madison Children's Museum  
100 N. Hamilton St  
Madison, WI 53703

To book a reservation, or for questions about group visits, please call (608) 256-6445, ext. 156.

Organization Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Please indicate the following for the students in your group:

Percentage of our students on free/reduced lunch or other aid programs: _____%	<b>OR</b>	Number of our students on free/reduced lunch or other aid programs: _____  Total number of students in our school: _____
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1.) Describe the funding available to your organization for field trips: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2.) Describe the special needs of your group, if applicable: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3.) Please provide any additional information that would aid us in determining your eligibility for a subsidy:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**The above information is true to the best of my knowledge.**

**Electronic Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Phone:** \_\_\_\_\_