

 **Digital Wild Adventure Request Form**

**Connecticut’s Beardsley Zoo**

Education Department

1875 Noble Avenue

Bridgeport, CT 06610-1600

**Please return this form to the Zoo’s Education Department to request your Digital Wild Adventure**

*You should receive an invoice / confirmation within 2 weeks*

# Phone: (203) 394-6563 Email form to: programming@beardsleyzoo.org

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| --- | --- |
| **Name of Group:** | **Description (Public School, Assisted Living, etc.):** |
| **Street Address:** | **City:** | **State and Zip Code:** |
| **Contact Name:** | **E-mail Address:** |
| **Phone Number:** | **Alternate Phone:** |

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| --- | --- | --- | --- |
| **Grade / Age of students:** | **Number of students:** | **Number of adults:** | **Desired Program Time(s):** |
| **Program date (1st choice):**  | **Program date (2nd choice):** | **Program date (3rd choice):** |

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| **Wild Adventure Options:***(Choose Option A or B, and additional offerings if desired)*1. **2 x 2** ($250)
	* 2 Animal Ambassadors
	* 2 Animal Habitats/Locations Around Zoo
2. **3 x 3** ($300)
	* 3 Animal Ambassadors
	* 3 Animal Habitats/Locations Around Zoo
 | **Additions:*** **Bobcat Training** ($60)
* **Commissary (Animal Kitchen) Tour** ($30)
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| **Which Livestream platform do you use?**☐Zoom☐ GoogleMeet ☐ Webex ☐ Other:  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  |
| **If you use Zoom, would you like the Zoo to host the meeting?**☐Yes☐ No**\*\*NOTE: If No, the lead teacher is responsible for creating, sending, and spotlighting the Zoom meeting/class they wish the Zoo to join.** |
| **Optional:** Do students/your group have specific questions before the program you wish to be answered or discussed? * Send them to: **programming@beardsleyzoo.org**
* Title the attachment as:“StudentQuestions-Name of School/Group”
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**Payment Method: Check Box**

|  |  |  |
| --- | --- | --- |
| Credit/Debit | Check | Other (Write in) |