

**CHILDREN'S HOLOCAUST MEMORIAL TOUR RESERVATION FORM**

**WHITWELL MIDDLE SCHOOL ~ 1 BUTTERFLY LANE ~ WHITWELL, TN 37397**

**423.658.5635 ~ FAX 423.658.6949**

**LINDA M. HOOPER, COORDINATOR**

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We appreciate your interest in bringing a group to the Children's Holocaust Memorial. Student led tours only take place during the school year on Fridays at 9:00 A.M. CT. We can only accommodate 60 people during a tour. Please visit the system website [www.marionschools.org](http://www.marionschools.org) for dates when we are in school. Please complete the bottom portion of this form and return by fax or regular mail. Do not email this form.

1. Whitwell Middle School does not allow food, drink, or chewing gum in the Memorial or inside the school. **WE ARE A PEANUT-FREE FACILITY.**
2. The railcar is a Memorial. Visitors are expected to be quiet and respectful in the building and in the railcar.
3. Visitors are expected to be dressed appropriately.
4. **The cost is \$2.00 per visitor. ½ of this amount must be sent immediately upon receipt of reservation confirmation. The remainder must be paid on the day of the visit.** No refunds will be given if your group cannot come on the reserved date. Checks are to be made payable to WMS with CHM tour on the memo line.
5. Visitors **must** arrive at the appointed time. **No late arrivals will be accepted.**
6. School groups must have 1 chaperone for each 15 students.
7. Guides will be provided to conduct the tour and answer questions.
8. A written history of the car and the project will be provided for each visitor.

**Please note we are in the central time zone. Everything east of us is in the eastern time zone.**

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Name of person/organization making reservations:

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No. of people in the group \_\_\_\_\_ adults \_\_\_\_\_ youths

Type of group \_\_\_\_\_ church \_\_\_\_\_ school \_\_\_\_\_ other (Please specify) \_\_\_\_\_

Date requested \_\_\_\_\_

Contact Information (**Please type or print clearly**)

Tel No. \_\_\_\_\_ Fax No. \_\_\_\_\_

Email \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

Amt. due for tour \_\_\_\_\_ Deposit due date \_\_\_\_\_

Confirmation by \_\_\_\_\_ Date \_\_\_\_\_

**You will receive a fax if we are able to accommodate your group on the requested date.**