



YOUTH GROUP BOOKING FORM

ALL TICKET ORDERS MUST BE COMPLETED ON THIS FORM.

Please print legibly

Date of Visit: _____ (Allow 5 Business Days for processing) **Arrival Time:** _____

Group Name: _____ **Today's Date:** _____

Contact Name: _____ **Tel #:** _____

Street Address: _____ **Cell #:** _____

City/State/Zip: _____ **Email Address:** _____

	Retail Rate		# of Tickets	15 % Discount		
Adult Tickets (ages 18-64)	\$29.95	X	_____	\$25.46	=	\$ _____
Senior Tickets (65+)	\$24.95	X	_____	\$21.21	=	\$ _____
Youth Tickets (12-17 years)	\$24.95	X	_____	\$21.21	=	\$ _____
Student Tickets (with valid Student ID)	\$24.95	X	_____	\$21.21	=	\$ _____
Child Tickets (ages 4 -11 years)	\$19.95	X	_____	\$16.96	=	\$ _____
Young Child & Infant (3 years and under)	FREE	X	_____	FREE	=	\$ 0
Multi-Media Headset Audio Tour – Academy Highlights	\$7.00	X	_____	\$7.00	=	\$ _____
Multi-Media Headset Audio Tour – Green Building	\$7.00	X	_____	\$7.00	=	\$ _____
Multi-Media Headset – Audio Tour Combo	\$12.00	X	_____	\$12.00	=	\$ _____

All transactions will be processed in \$US.
Ticket prices include all state and local sales tax

COMPLIMENTARY TICKETS: Complimentary tickets will be automatically booked for your group. Please do not include them in your ticket order above. Complimentary tickets are valid on the day of your group visit only and will be issued as follows. Complimentary tickets are not valid with any premium tours

10 paid tickets = 1 comp ticket, 35 paid tickets = 2 comp tickets

70 paid tickets = 3 comp tickets, 105 paid tickets = 4 comp tickets

Every additional 35 paid tickets = 1 additional complimentary ticket.

MULTI-MEDIA HEADSET AGREEMENT: For multi-media headset orders please provide credit card details if different from those used to pay for this booking. The credit card will be used as a security for the return of all units. Missing units will be charged at the rate of \$100 per unit. By booking headsets I authorize the California Academy of Sciences to charge my account for all multi-media headset 'lost fees', and agree to pay in accordance with the card issuer agreement.

_____ Signature _____ Date

METHOD OF PRE-PAYMENT FOR YOUR GROUP BOOKING

CHECK NUMBER: _____ **VISA** **MASTERCARD** **AMERICAN EXPRESS** **DISCOVER**

A \$20 shipping & handling fee will be processed for any mailing associated with your group booking

Credit Card Number : _____ Expiration Date ____/____/____

Name as it appears on the card: _____ Authorized Signature: _____

I authorize the California Academy of Sciences to charge my account for the grand total above. I agree to pay in accordance with the card issuer agreement.

Planetarium seat bookings:	# of 3 rd – 5 th grade + chaperones	# of 6 th – 8 th grade + chaperones	# of 9 th – 12 th grade + chaperones	All Youth
Children and Youth groups are required to reserve into a grade-appropriate Planetarium Show, if available. Please indicate the total # of participants from your group that plan to see the Planetarium. Please note the Planetarium is only available to children 8 years and older and must be accompanied by their adult chaperones.	Mon, Wed, Thurs 10:30 AM	Mondays 10:30 AM	Mon – Thurs 11:30 AM	Saturdays 10:30 AM

TO PLACE YOUR ORDER COMPLETE AND RETURN THIS FORM TO: FAX: 415 379 5761 Email: ayoussef@calacademy.org

For more information please contact Ayman Youssef ayoussef@calacademy.org : 415 379 5176

BY MAKING A GROUP BOOKING YOU ARE ACKNOWLEDGING YOU HAVE READ AND AGREE TO THE GROUP BOOKING TERMS & CONDITIONS POSTED ON OUR WEBSITE WWW.CALACADEMY.ORG

Information and pricing subject to change without notice. All terms of this agreement are confidential.