

LIVSREISE Student/Youth Group Request

Please complete and email to marg@norwegianheritagecenter.org **OR**

Mail to: M Listug, c/o Livsreise. 277 W. Main St., Stoughton Wi 53589

Group information	
Group/School Name	
Arrival date and time and departure time	
E-mail	
Phone	Land line: () _____ Cell: () _____
Group Leader Name and Contact Address:	
Due to Covid-19 school group size is limited to 15 including chaperones. The group request must be made at least 3 weeks in advance. Groups are subject to availability of volunteers.	School groups require a chaperone for every 8 students. Livsreise staff/volunteers cannot assist as chaperones. I understand that I must provide chaperones for my group tour. I agree to the above requirements. SIGNED _____
Mode of transportation?	By car _____ By Bus _____
Visiting other destinations in the area?	
Grade Level or Age range of group?	
Do any students have special needs? If you have a student requiring special needs including mobility assistance, Livsreise staff or volunteers cannot act as an assistant. I agree to abide by this requirement.	SIGNED _____
Focus of your visit	
Can we provide study guides?	
Do you have any other special considerations or requests?	
Do you need assistance with transportation costs?	
For Livsreise use only in the below section	
Confirmed by Staff member	Name: _____
Confirmed on:	Date _____
Waiting for final information?	Yes _____ No _____
Received final CF on _____	By _____