## **VISIT REQUEST FORM**



The Central Bank Museum welcomes all visitors – schools, universities, local and foreign tour groups, community groups, public and private institutions.

Groups that number over 10 persons are required to complete this Visit Request Form for museum guided or self-guided visits. Guided visits are only done on request. Appointments for group visits should be made no less than two (2) weeks in advance for guided tours and no less than three (3) days for self-guided tours. A separate form must be used for each visit. We will do our best to accommodate your request; however, please note that your visit is not confirmed until you have received email or telephone confirmation.

| <u>1.</u> | Tour Date Information  |  |  |
|-----------|--|--|--|
|           | Requested date: Requested time:  |  |  |
| <u>2.</u> | Group Information:   |  |  |
|           | Group/Organization/Institution Name:   |  |  |
|           | Address:   |  |  |
|           | Telephone number:  |  |  |
|           | Email:   |  |  |
| <u>3.</u> | Contact Information:  Please list the primary contact for the visit. We will contact the person named below with any questions or concerns about the visit request and to confirm the appointment. |  |  |
|           |  |  |  |
|           | Full name:   |  |  |
|           | Cell phone number:   |  |  |
|           | Email address:   |  |  |
|           | Will the person listed above be the group leader on the day of the visit?  |  |  |
|           | Yes No No  |  |  |
| <u>4.</u> | Group Type:  |  |  |
|           | Business/Organization University   |  |  |
|           | Secondary School Primary School  |  |  |
|           | Personal/Family Community Organization   |  |  |

| Other  |   |  |
|--|---|--|
| Is this your group's first visit to the Museum?  |   |  |
| Yes No No  |   |  |
| Group Size:  |   |  |
| It is important for us know your group sizvisit.   | ze in order for us to adequately prepare for your   |  |
| Number of adults:  | Number of seniors over (60):  |  |
| Number of students/children:   | Total group size:   |  |
| Age group:   | _ (e.g. 10 -12 years or Standard 5 class)   |  |
|  |   |  |
| <u>Visit Type</u> :  |   |  |
| Guided:  | Self-guided:  |  |
| Special requests:  |   |  |
| Groups of 10 and over may request a special presentation from one of our Economists from the Research Department or from the staff of the National Financial Literacy Programme. Please let us know if you would like to request a special presentation and which areas you would want us to focus on. |   |  |
|  |   |  |
|  |   |  |
| Kindly indicate if there any special needs visitors in your group and what kind of assistance they would need, if any.   |   |  |
|  |   |  |
|  |   |  |
| 10. How did you learn about our museum?  |   |  |
|  |   |  |
|  |   |  |
| Attended/visited the museum in the past  | :: <b></b>  |  |
| Other (please specify):  |   |  |
|  | Is this your group's first visit to the Muse Yes No Soup Size:  It is important for us know your group sizvisit.  Number of adults: |  |