

# York W. Bailey Museum

(843) 838-2432 • (843) 838-2474 • Fax: (843) 838-2445 • www.penncenter.com

## GROUP RESERVATION FORM

Group Name: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Requested Date of Visit: \_\_\_\_\_ Arrival Time \_\_\_\_\_ Actual Date of Visit: \_\_\_\_\_

Number of People: \_\_\_\_\_ Age Group: \_\_\_\_\_ Children \_\_\_\_\_ Teens \_\_\_\_\_ College \_\_\_\_\_ Adults \_\_\_\_\_ Mixed \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Mobile: \_\_\_\_\_

E-mail: \_\_\_\_\_

Special interests and objectives:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### The group is interested in the following CULTURAL ACTIVITIES:

- |   |  |
|---|--|
| <input type="checkbox"/> Museum Tour                    | <input type="checkbox"/> "Who Dat Gullah"                            |
| <input type="checkbox"/> Patchwork Quilt                | <input type="checkbox"/> "Family Across the Sea"                     |
| <input type="checkbox"/> The Griot                      | <input type="checkbox"/> "Penn School and the Port Royal Experiment" |
| <input type="checkbox"/> Eco Collage                    | <input type="checkbox"/> "Hants, Plat-eyes and Ghosts"               |
| <input type="checkbox"/> From Plants to Pants           | <input type="checkbox"/> Sea Island Tales                            |
| <input type="checkbox"/> Museum Scavenger Hunt          | <input type="checkbox"/> Sweet Potato Yum Yum                        |
| <input type="checkbox"/> Sea Island Sweet Grass Baskets | <input type="checkbox"/> Spirituals                                  |
| <input type="checkbox"/> Out the Field and Into the Pot | <input type="checkbox"/> Spirituals and Shout                        |
| <input type="checkbox"/> Casting the Net                | <input type="checkbox"/> Basket-weaving                              |
| <input type="checkbox"/> Call & Response                | <input type="checkbox"/> Indigo Demonstration                        |
| <input type="checkbox"/> "The Diary of Laura Towne"     | <input type="checkbox"/> Other: _____                                |
| <input type="checkbox"/> "Still Tongue Mek A Wise Head" |  |

### The group is interested in the following PENN CENTER SERVICES:

- |  |  |
|--|--|
| <input type="checkbox"/> Conference Facilities/Lodging | <input type="checkbox"/> Ropes Course                          |
| <input type="checkbox"/> Food Service                  | <input type="checkbox"/> Greetings from the Executive Director |
| <input type="checkbox"/> Meeting Space                 | <input type="checkbox"/> Other: _____                          |

### ACTION TAKEN (Please initial and date):

- |   |   |
|---|---|
| <input type="checkbox"/> Cultural Services Arranged _____     | <input type="checkbox"/> Forwarded to Business Office _____     |
| <input type="checkbox"/> Confirmation Letter Mailed _____     | <input type="checkbox"/> Forwarded to Executive Secretary _____ |
| <input type="checkbox"/> Additional Information Mailed _____  | <input type="checkbox"/> Visit Cancelled _____                  |
| <input type="checkbox"/> Forwarded to Conference Center _____ | <input type="checkbox"/> Visit Rescheduled _____                |
| <input type="checkbox"/> Forwarded to PACE _____              | <input type="checkbox"/> Other: _____                           |

### STAFF CERTIFICATION:

Is additional follow-up required? No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, please indicate:

Signature \_\_\_\_\_ Date \_\_\_\_\_

NOTE: Please Print & Return To Penn Center.