Red River National Wildlife Refuge

Reservation Form – **PRESCHOOL GROUPS**

Email, mail or drop off this form to Red River NWR at least 3 weeks prior to your desired program date. You will receive a confirmation email from refuge staff once your program has been scheduled.

Name of School/Day Care:_____

Name of Contact:_____

Contact Phone:_____ **E-mail**: _____

Number of Children:_____ (maximum 50 students, small groups preferred)

Number of Adult Chaperones:_____ (minimum 1 adult/6 children)

Describe or list objectives/topics for your refuge visit: (possible topics include: food chain, nature stories, refuge animals, nature observation, birds, mammals, fish, reptiles, amphibians, insects, refuge tour and nature walk.)

_____

_____

_____

Program Date & Time: (between 8:30 am and 2:00 pm)

1st choice for program date:_____ **Start Time**:_____ **End Time**:_____

2nd choice for program date: _____ **Start Time**:_____ **End Time**:_____

3rd choice for program date: _____ **Start Time**:_____ **End Time**:_____

Signature of requesting adult: _____ **Date**:_____

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Fax: (318) 742-1259
Phone: (318) 742-1219
Web: www.fws.gov/refuge/Red_River