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SCHOOL INFROMATION:

Contact Name/position:
School:
Phone Number:
Email:

Address:

Emergency Contact: Direct Phone number:

GRADE LEVEL: NUMBER OF ___STUDENTS ___PARENTS ___TEACHERS ___SIBLING \$5 per person. Please collect money from all attendees and make 1 payment upon arrival. ALL participants must complete a liability waiver – due upon arrival.

REQUESTED DATE AND TIME OF VISIT:_____

FIELD TRIPS GENERALLY LAST 90 MINUTES, DEPENDING ON AGE, WITH ADDITIONAL TIME FOR LUNCH OR CRAFTS. ____ WE WILL NOT BE BRINGING SACK LUNCHES AND WOULD LIKE A PIZZA PARTY \$3 PER PERSON ___ CRAFTS – (MAY REQUIRE ADDITIONAL TIME) \$2 PER STUDENT

TOPICS THAT WE COVER:

- Barnyard Animals
- Pond Life

- Live Cycles
- Farm Chores
- Growing Gardens

PLEASE NOTE:

This Form is a request only and does NOT guarantee the date requested. Our Staff will follow up to confirm. Scheduling is on a first come/first served basis. Payment is due upon arrival. We accept cash/check/credit card/PayPal