



KANSAS CITY
SYMPHONY

INSTRUMENT PETTING ZOO 2009-2010
PRESCHOOL/COMMUNITY REQUEST FORM

CONTACT INFORMATION

Contact Name _____ Phone _____-_____-_____

Contact Title _____ Email _____

Site Name _____ County _____

School Address _____ City _____ State ____ Zip _____

REQUEST INFORMATION

Please specify, in order of preference, three dates on which you could host the Instrument Petting Zoo.

CHOICE	DAY OF WEEK	MONTH	DATE	YEAR	TIME/LENGTH
1					
2					
3					

If none of the above dates work with our calendar, would you be interested in other dates?

_____ YES _____ NO

Will this program be held as a standalone event (A), or as a part of a larger event (B)?

_____ A _____ B

Approximately how many people will participate in the Instrument Petting Zoo? _____

INSTRUMENT PETTING ZOO NOTES AND GUIDELINES:

- Requests for presentations during Monday-Friday, 8 a.m.-4 p.m. will no longer be accepted
- Events which include the Instrument Petting Zoo must be free and open to the community at large (no registration, tuition or other admission fees of any kind are permissible)
- Venues should provide 1 volunteer for every 20 children participating

YOU WILL BE NOTIFIED OF YOUR REQUEST STATUS VIA TELEPHONE BY THE END OF SEPTEMBER.

TELL US MORE!

How did you find out about the Instrument Petting Zoo?

Have you attended previous KCS education activities? If so, please list which events here.

PLEASE PRINT, COMPLETE AND RETURN THIS FORM VIA U.S. MAIL TO:

Jedd Schneider, Education Ticketing Coordinator
Kansas City Symphony • 1020 Central, Suite 300 • Kansas City, MO 64105

For questions only: Phone: 816-218-2609 • E-mail: jschneider@kcsymphony.org

**REQUESTS MUST BE RECEIVED PRIOR TO SEPTEMBER 5, 2009.
REQUESTS WILL NOT BE ACCEPTED BY FAX, EMAIL OR TELEPHONE.**