

**Group Reservation Confirmation**

To be considered a group reservation, a group of 10 visitors is needed.

Upon arrival if the visitor count has gone up- the credit card on file will be billed for additional guests.

A minimum of 10 guest is required for reservation, should the visitor count decrease day of you will be charged for 10 visitors as the guarantee.

Visit Date: \_\_\_\_\_ Visit Time: \_\_\_\_\_

Group Company/Organization: \_\_\_\_\_

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

Group City: \_\_\_\_\_

Group Zip: \_\_\_\_\_

Visitors: \_\_\_\_\_

Contact Name: \_\_\_\_\_

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

Office: \_\_\_\_\_ Cell: \_\_\_\_\_

Organizer Arrival Time: \_\_\_\_\_

Departure Time: \_\_\_\_\_

**After Hours Private Tours.**

**“Mask Up”**

Private, educator led tours.

Tuesday, Wednesday and Fridays.

5pm- 7pm.

Reservation required.

\$200.00 for a group of 10 guest. (minimum)

Plan an evening out learning about health and sciences.

***Inspirational, Evidence Based, Individualized.***

**Debakey Cell Lab.**

**“Mask Up”**

Doctor / Educator led lab experiences.

Tuesday, Wednesday & Fridays.

5pm-7pm.

Reservations required.

\$300.00 for groups of 10 guests, 7 years old and older.

Lab coats, goggles and gloves provided.

***Bring your curiosity!***

**Souvenir Gift Bags**

Healthy themed gift bags, includes a logo pencil, a syringe pen, brainteaser puzzle  
and a funny nose pencil sharpener.

\$6.50 value \$4 for groups.

Count # \_\_\_\_\_

Please let us know if there is any other information, we should be aware of while your group is  
onsite.

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**PARKING**

Guest parking for events held after 5 pm at The Health Museum is at a \$5.00 rate per car. Parking for events before 5 pm is offered for \$3 (Museum members), \$5 (Museum visitors) and \$8 (non-visitors). Parking for events may be hosted by client and charged to master bill or the guest can own.

**COVID**

Please note the health Museum is following all CDC recommendations.

Social distancing, limited guest count, hand washing upon arrival, "mask up" prior to entering building, hand sanitation stations throughout building and plexiglass shields at point of sales and visitor services.

All group reservations are confirmed once the deposit has been made.

**Please note that a \$50 deposit holds your date and time and the balance is due at least one week before your trip. You should pay your deposit as soon as possible. Also, please know that the deposit is part of the full payment, not an extra charge. Once you pay the deposit, you will receive a new confirmation reflecting a revised balance. If scheduling multiple reservations, a separate payment is required for each date reserved. If checks include more than one reservation payment, it will NOT be accepted. Your full payment will be due no later than ONE WEEK PRIOR TO YOUR VISIT.**

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Your group visit is scheduled for **Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_

We would like for your group to arrive **15 minutes** before your start time so we can prepare your group. Usually group visits take one and a half to two hours, depending on the age of the visitors.

Please email [Lpfister@thehealthmuseum.org](mailto:Lpfister@thehealthmuseum.org) if you need to make any revisions to your reservation.

Thank you, for choosing The Health Museum! Be Well!

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I have read, understand and agree to adhere to all the policies set-forth by the John P. McGovern Museum of Health and Medical Science.

Agreed to and executed this day of \_\_\_\_\_

Client: \_\_\_\_\_

By (contact): \_\_\_\_\_

Deposit Amount\*: \_\_\_\_\_

**Please note that a \$50 deposit holds your date and time.**

Check # or Credit card: \_\_\_\_\_ Security Code: \_\_\_\_\_ Exp date: \_\_\_\_\_

Card Type:    MasterCard    Visa    American Express    Discover

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

(This contract must be completed, submitted to the Museum contact and deposit received to secure requested date(s))

**For Office Use Only**

**Received by THE HEALTH MUSEUM as The John P. McGovern Museum of Health & Medical Science:**

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_