

Crow's Neck Environmental Education Center
P. O. Box 460
Tishomingo, MS 38873
662-438-6751 (phone)
662-438-6767 (fax)

Program Application

Program Applications are to be sent in as soon as possible requesting a date/dates to visit our facility. A contract will be prepared upon receiving the Program Application. Please visit our website (www.crowsneck.org) for a description of classes. Please print, complete all the spaces on this form, and return it via email (rkwilliams@nemcc.edu) or fax (662-438-6767).

Group Name: _____

Address: _____

Contact Person: _____

Back-up Contact Person: _____

Do any students/adults have special needs requiring accommodations? If yes, please briefly explain: _____

Contact's phone information:

Preferred number to call: _____

Work: _____ Fax: _____

Home: _____ Cell: _____

Email: _____

Objectives for bringing group to Crow's Neck:

Choice of Program:

Day Program ____

Residential Program: ____ how long?

1 night ____ 2 nights ____

3 nights ____ 4 nights ____

Dates Requested:

1st choice: _____

2nd choice: _____

3rd choice: _____

Arrival Time: _____

Departure time: _____

(Residential group only-arrive no earlier than 11:00am) (Residential group only-depart no later than 12:15pm)

Youth/Adult: _____

Grade/Age: _____

Boys ____ Girls ____ Men ____ Women ____

Will you be bringing snacks for your group? Yes ____ No ____ If yes, we will be happy to store them in the main facility.

Do you want Store Time scheduled for your group during your visit? Yes ____ No ____

Signature: _____ Date: _____

- Please provide an accurate participant estimate. Program cost is based on this number.

- Groups may submit a more accurate participant count up to 7 days prior to reserved dates. Thereafter, groups will be responsible for 100% of the number of participants indicated on the reservation contract.