

### INTERPRETIVE PROGRAM CONTRACT AND REQUEST FORM

1. **Please arrive on time.** Allow time for your group to use the restroom facilities, be divided into smaller groups, etc. before the scheduled time of your program. Park Staff have set aside time to spend with your group, so please notify the park if you will be arriving late for your visit. **Arriving more than 30 minutes late will require your group to forfeit their program without refund.**
2. Private Group Contract and Request Forms must be received a minimum of two (2) weeks prior to the date of your requested field trip program. Program date and time are not finalized until approved by Park Staff.
3. Program fees must be paid a minimum of two (2) weeks prior to the event, unless stated otherwise. Failure to complete payment by the due date may result in your group forfeiting their program.
4. Changes to your program request must be made more than 72 hours before your scheduled program.
5. We require one (1) adult for every ten (10) students. It is the responsibility of the adults within your group to ensure discipline.

#### GROUP INFORMATION

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

Group Leader's Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Number of Participants: \_\_\_\_\_ Ages of Participants: \_\_\_\_\_

#### PROGRAM INFORMATION

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

Preferred Date of Program: \_\_\_\_\_ Preferred Start Time: \_\_\_\_\_

Alternative Dates: \_\_\_\_\_

We can accommodate all levels and abilities, however, please list any needs or concerns you may have (ex: physical strength, disabilities, age, etc.)

\_\_\_\_\_  
Group Leader Signature

\_\_\_\_\_  
Date

#### Send Program Request Forms To:

pm.naturalist@gmail.com

**Panola Mountain State Park**  
Attn: Park Program Admin  
2620 Hwy 155 SW  
Stockbridge, GA 30281

#### To Be Completed By Park Staff:

Program Approved: \_\_\_\_\_

Date: \_\_\_\_\_

**Panola Mountain**  
**State Park** 