

PIONEER SCHOOL DAY
San Joaquin County Historical Museum

APPLICATION FORM



Due at the Museum before: July 31

Teacher _____ Home Phone _____

Home Address _____ City _____ Zip _____

School _____ School District _____ School Phone _____

School Address _____ Date of previous visit _____
Street, City and Zip

Grade Level _____

Please state briefly why you would like the PIONEER SCHOOL DAY experience for your students.

Please Keep a copy of this application for your records, **and** submit the original to:

PIONEER SCHOOL DAY
San Joaquin County Historical Museum
P.O. Box 30 Lodi, CA 95241

FOR OFFICE USE ONLY
Date received _____
Approved: yes _____ no _____