Boekjebezoek

**RESERVATION REQUEST FOR GROUP VISIT**

|  |  |
| --- | --- |
| **NAME OF THE MUSEUM** |  |
| Name of the exposition/tour/activity |  |
| Visit with or without guide?  |  |
| Language guided tour |  |
| Number of guides |  |
| **Date of the visit** |  |
| **Time of the visit** |  |
|  |  |
| **ORGANISATION/ SCHOOL** |  |
| Name |  |
| Address |  |
| City and postal code |  |
| Phone number |  |
| e-mail |  |
| TVA-number (if applicable) |  |
|  |  |
| **CONTACT** |  |
| Name |  |
| Address |  |
| City and postal code |  |
| Mobile phone number |  |
| e-mail |  |
|  |  |
| **VISITORS** |  |
| Number of participants (approximative) |  |
| Average age |  |
| **For school groups:** number of pupils per class |  |
| Grade/level of pupils/students |  |
|  |  |
| **Remarks/other questions** |  |

Thank you for sending this request to boekjebezoek@stad.gent.
We register your reservation as soon as possible. Please note that it may take longer to find English/German/French guides. We keep you informed as soon as the guide(s) are confirmed.