WICHITA ART MUSEUM

Bus Transportation Reimbursement Request Form

Name of School: _____

Contact Person: _____

_____

Address: _____

Phone: _____

Email: _____

Tour Date: _____

Time of Tour: _____

Number of Buses: _____

Number of Students: _____

Name and Address to mail reimbursement:

_____

_____

Conditions for reimbursement:
Reimbursement is for scheduled school groups only. Wichita Art Museum (hereafter WAM) will reimburse 100% of the total cost of bus transportation of students to and from the museum.

This form must be returned with an invoice from the school district/ bus company. The invoice should provide the following information:
1. School name and USD #
*Private schools must include W-9 Forms
2. Contact Person
3. Pick-up and drop-off locations and time
4. Transportation cost for travel

Reimbursement will not be made without submission of an invoice and completed form. To be eligible for reimbursement, this information must be received by WAM no later than one month after the tour; no payments will be made for requests that are not timely submitted.

Acknowledgments:
The School/School District participating in WAM's school tour program acknowledges, understands, and confirms by signing and submitting this Transportation Reimbursement Request Form that:

- WAM has no involvement whatsoever in any transportation and related arrangements to transport the school's students and others to and from the Wichita Art Museum.

- Transportation and related arrangements are the sole responsibility of the School/School District.

- WAM assumes no responsibility whatsoever for any loss, cost, injury or damage to persons and property, which may arise and result from such transportation and related arrangements.

The invoice, completed reimbursement request form, and evaluation form should be

mailed to: Education Department
Wichita Art Museum
1400 West Museum Blvd
Wichita, KS 67203

Please contact the Education Department with any questions at (316) 268-4907.

_____
Signature of School Representative

_____
Position or Title

_____
Date

_ _
For museum use only