Grand Rapids Art Museum College and University Semester Access Request Form

Please submit this request along with an alphabetized course roster three weeks in advance of the first visit to GRAM's School Experience Manager. Requests may be mailed to the address below or emailed to ejarvi@artmuseumgr.org.

Grand Rapids Art Museum Attn: School Experience Manager – Course Rosters 101 Monroe Center NW Grand Rapids, MI 49503

The course fee is \$5/student. The course fee payment must be collected and paid by the instructor or institution in one lump sum as we are not able to process individual or separate payments for each student enrolled in the course. This fee may be paid by check or credit card. Payment must be accepted prior to your first visit by calling 616.831.2928 to pay by phone or by including payment information below.

Please contact Emily Jarvi, School Experience Manager, with any questions at ejarvi@artmuseumgr.org or 616.831.2928. Institution: Course title and number: _____ Course instructor name: _____ Address: State: _____ Zip: _____ Instructor Phone: _____ Instructor Email: _____ Semester & year of request: Total number of students enrolled in course: _____ Total course fee amount: _____ Visit category (check one): All categories entitle students and course instructors to have unlimited visits to the museum throughout the length of the semester during the museum's open hours. Please visit our website at artmuseumar.org for our current hours of operation. Self-guided visit (Instructor with class) Requested date and time: Group size: If there are any individuals with disabilities with your group who need accessibility accommodations, please list the accommodations below and/or reach out to GRAM's School Experience Manager to communicate your needs at 616.831.2928 or email ejarvi@artmuseumgr.org. 2) Individual student admittance throughout the semester Jansma Family Works on Paper Study visit To schedule an appointment for the Works on Paper Study visit, please call 616.242.5020. **Payment** Please Indicate: Check (payable to the Grand Rapids Art Museum) Credit Card [] Discover/Amex Name (as it appears on the card): Credit Card Number:

Expiration Date: ______ Security Code: ______ [] Receipt of payment requested