## Tate Geological Museum Paleontology Dig Registration

Summer Dig 2020

Name (please print)			
Mailing address			
Date of birth Cell Phone E-mail Please specify any dietar		🛛 Mal	
Check here if you reque	· · · <u> </u>		
	Prefe	rred Week	
□July 12-17	August 2-7	August 16-21	August 30-Sept 4
	ion is 16 ( <i>16 and 17-ye</i> ember of the Tate Geol	ar-olds must be acco ogical Museum:	s prior to the start of the dig. The ompanied by an adult participant.)
Mail completed form to:		F	or Office Use:
Tate Geological Museum P	aleontology Digs		Confirmation letter sent
125 College Dr.			☐ database
Casper, WY 82601 Or fax	to: 307-268-3308	[	🖵 med rel
			🖵 deposit paid
Or email completed forms			full payment received
jpcavigelli@caspercollege.	edu AND <u>pfinkle@cas</u>	percollege.edu	
This payment includes (ch	eck one or two): 🗍 🗅	enosit only or 🗋 Fi	ull navment
Check #	•	•	
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Credit Card [ ] Visa [ ] N Card #			de
Signature			

Note: We do not keep credit card information on file; we will ask you for the information again for the second payment

**NOTE:** There is additional paperwork to fill out if you want to drive your (or rental) vehicle from Casper to Lusk or Medicine Bow. You will need to submit the "Drive my own vehicle" form and a copy of your driver's license and vehicle insurance no later than 30 days before the trip. Submit this form if you are even considering driving your own vehicle beyond Casper. Otherwise, vehicles can be left at the museum for the week.