



1701 Pacific Avenue  
Tacoma, WA 98402

T 253-272-4258

F 253-627-1898

www.TacomaArtMuseum.org

Tacoma Art Museum received a gift to support transportation funding for Washington State schools interested in visiting *Art of the American West: The Haub Family Collection*. Funds are awarded on a first-come, served basis. Funds may cover partial to full mileage reimbursement for schools outside of Tacoma or Pierce Transit Class Passes for Tacoma Public Schools.

Please submit the application form with a letter that explains how your students will benefit directly from visiting the museum and how the experience corresponds to your curriculum.

Name of School \_\_\_\_\_

School Address \_\_\_\_\_

Teacher Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Email \_\_\_\_\_ Number of Students \_\_\_\_\_

% of Free and Reduced Lunch \_\_\_\_\_ Field Trip Date Requested \_\_\_\_\_

Number of Buses Requested \_\_\_\_\_ Estimated Mileage/Class Pass Cost\$ \_\_\_\_\_

Teacher's Signature \_\_\_\_\_ Date \_\_\_\_\_

Direct your completed application form and letter of interest to School Tour Program, by email at [Education@TacomaArtMuseum.org](mailto:Education@TacomaArtMuseum.org), fax 253-627-1898 or mail 1701 Pacific Avenue Tacoma, WA 98402. Schools will be notified within two weeks if funding has been approved.

**Guidelines and Eligibility**

- Funds will only cover transportation costs from school, to museum, and back.
- Schools are required to arrange transportation.
- Invoices for mileage or Class Passes are to be submitted within 30 days of visit.
- Funding will not pay for cancelled buses or corresponding fees.

**Museum Use Only**

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|-----------------------------------|---|
| Date of Request: _____            | Funding Approved: Yes: ___ No: ___              |
| Received by: _____                | Reason for Denial _____                         |
| Final Invoice Received: _____     | Pending Availability of Funds: Yes: ___ No: ___ |
| Reimbursable: _____               | Date Notified of Approval / Denial _____        |
| Date Submitted for Payment: _____ | Notified by _____                               |