



3500 Peachtree Road, Suite G-1  
Atlanta, Georgia 30326

# 2018 SCHOOL REGISTRATION FORM

These prices are valid through the school year. If you are booking from 5/28/18 – 8/11/18, please use the Summer Registration Form.

All group field trips must be made with this form at least 10 business days before your visit.

## TERMS & CONDITIONS

- Requested dates and times are subject to availability.
- A minimum of 10 paying children is required to receive group rates.
- Group rates are valid Monday – Friday and may exclude holidays and school breaks.
- Full and final payments must be made on the day of the visit.
- Your tax exempt letter must be sent in with this form.
- No refunds are given on group visits.
- Your trip is not booked until you receive a confirmation email from our group sales office.

### SUBMITTING YOUR FORM:

Please Fax to: 404-848-9591 or email  
[LDCATL.Groupsales@LEGOLANDDiscoveryCenter.com](mailto:LDCATL.Groupsales@LEGOLANDDiscoveryCenter.com)

Questions about registration? Contact  
[LDCATL.Groupsales@LEGOLANDDiscoveryCenter.com](mailto:LDCATL.Groupsales@LEGOLANDDiscoveryCenter.com)  
Phone: 404-848-9252 ext. 4001

### VISIT FEES – Please check all that apply

	OPTION	PRICE
<input type="checkbox"/>	CHILD ADMISSION	\$7.00
<input type="checkbox"/>	ADDITIONAL ADULT	\$10.00
<input type="checkbox"/>	MEAL DEAL	\$5.00
<input type="checkbox"/>	WORKSHOP	\$3.00
<input type="checkbox"/>	NO MEAL DEAL**	

## GENERAL INFORMATION

Today's Date: \_\_\_\_\_

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

Contact Person's Full Name \_\_\_\_\_

Job Title \_\_\_\_\_

Contact Person's Work Email \_\_\_\_\_

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

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

School Phone # \_\_\_\_\_

Contact Person Phone # \_\_\_\_\_

Alternate Contact \_\_\_\_\_

Ages of Children \_\_\_\_\_

## YOUR VISIT PREFERENCES

One adult chaperone is free for every five paying children. Child tickets are \$7. Additional adult tickets are \$10. If you choose the Meal Deal we will automatically include all guests in your order unless you indicate otherwise.

# CHILDREN		# ADULTS	

	DATE OF VISIT	ARRIVAL TIME	DEPARTURE TIME
1 <sup>ST</sup> Choice			
2 <sup>ND</sup> Choice			
3 <sup>RD</sup> Choice			

\*\*If you select to forgo the meal deal option, you are indicating that your group has plans to eat before or after the visit.

## REGISTRATION AGREEMENT (Required)

I (please print name) \_\_\_\_\_ have read and understand the Terms & Conditions listed above regarding payment and booking terms, including LEGOLAND Discovery Center's no outside food policy.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*Please see the next page to complete your workshop and meal preferences\*\*\*



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## 2017 SCHOOL REGISTRATION FORM

### Workshop & Meal Preferences

Please complete this form as best you can. Based on this information we will create a class & lunch schedule for the day of your visit.

- 1. Choose your workshop and meal.** Workshops run approximately 30 minutes long. Workshops are not mandatory during your visit. Lunches are scheduled in 30 minute intervals. **Meal deal numbers must be confirmed 48 hours prior to field trip. No refunds are given on orders.**

WORKSHOP OPTIONS	Price	WORKSHOP GRADE LEVEL	CHOICE
Spinning Tops (30 kids max.)	\$3.00	K-1 <sup>st</sup>	<input type="checkbox"/>
Seasons (30 kids max.)	\$3.00	K- 1 <sup>st</sup>	<input type="checkbox"/>
Spin the Gears (30 kids max)	\$3.00	2 <sup>nd</sup> – 3 <sup>rd</sup>	<input type="checkbox"/>
What a Great Experience! (30 kids max.)	\$3.00	2 <sup>nd</sup> – 6 <sup>th</sup>	
Merry-Go-Round (30 kids max.)	\$3.00	4 <sup>th</sup> -6 <sup>th</sup>	

MEAL OPTIONS	PRICE	QTY.
Minimum order qty. is 10 per choice		
<b>MEAL DEAL:</b> Cheese Pizza, Chips, Juice	\$5.00	
<b>MEAL DEAL:</b> Pepperoni Pizza, Chips, Juice	\$5.00	
<b>MEAL DEAL:</b> Ham & Cheese Sandwich, Chips, Juice	\$5.00	
<b>MEAL DEAL:</b> Hot dog, Chips, Juice	\$5.00	

- 2. Class Details.** If you have more than one class visiting, please complete the table below. We will do our best to schedule the workshops based on this information. We may have to combine or split classes to accommodate the workshop schedule for the day.

TEACHER'S NAME / ROOM NUMBER	GRADE LEVEL	WORKSHOP	# STUDENTS

**IMPORTANT:** Please submit both pages of this form at the time of registration. We can not guarantee workshop availability on the day of your visit without this information completed.

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