



## Schools on Trains Reservation Request

### Trip Information:

Please select a Travel Option:  Round-Trip  One-Way

Field Trip Date (1st choice):

Number of Students:

Field Trip Date (2nd choice):

Number of Chaperones:

Are there people in your group traveling with wheelchairs?  
If so, please indicate the total number:

Boarding Train in What City/Station:

Preferred Train Number:

Preferred Train Time:

Destination City/Station:

Preferred Train Number:

Preferred Train Time:

### School/Group Information:

School/Group Name:

School/Group Mailing Address:

School/Group City:

State:

Zip Code:

Grade of Group:

## Contact Information:

Contact Person (full name):

Mailing Address for tickets:

Contact City:  State:  Zip Code:

Daytime Phone Number:  Please indicate: Business or Home  
(circle one)

Cell Phone Number:  Best Time to Call:

E-mail Address:

## Emergency Contact Information:

In case of a train delay on the **day of the trip**, we'd like to be able to reach the group leader by phone. If possible, please provide the following information, thank you.

Emergency Contact Name:

Emergency Contact Cell Phone Number:

Short comment to Program Coordinator:

## Please submit this form via email or fax:

Email: [Amtrak-SchoolsonTrains@Amtrak.com](mailto:Amtrak-SchoolsonTrains@Amtrak.com)

Fax: 1-800-872-3298