

CONFIRMATION OF DATE

GEORGIA AG EXPERIENCE

A MOBILE CLASSROOM POWERED BY



The Georgia Ag Experience is scheduled to visit your location on: _____
(Mobile Classroom Visit Dates)

Please complete this form and email to **info@GeorgiaAgExperience.org** to accept and confirm these **dates within a week.**

If you are not able to confirm the assigned dates, **please contact us immediately** so the week can be released and assigned to another school. We may be able to accommodate you at another time OR on another date.

A 50% non-refundable deposit is required within a week to guarantee this reservation. Your Invoice was emailed to you upon approval. Please see Deposit Form for payments details.

Are delivery/pickup dates, listed in approval email, approved by the visit location? YES NO

County Farm Bureau Office: _____

County Contact Person: _____ Position: _____

Office Phone: _____ Cell Phone: _____

Email: _____

School Name: _____

Mailing Address: _____ Position: _____

Physical Address: _____ Cell Phone: _____

City: _____ State: _____ Zip: _____

(The contact person may be the event contact appointed to communicate with Georgia Ag Experience staff to arrange the details for the visit.)

School/Org Contact Person: _____

Position: _____

Office Phone: _____ Cell Phone: _____

Email: _____

Contact's Name (printed): _____

Contact's Signature: _____ Date: _____