Thank you for your interest in having your group visit Days End Farm Horse Rescue! We love welcoming groups to the farm to learn about our mission, the horses in our care and see what their life is like on the farm. Please complete the form below, so that we are better able to serve your group or organization.

School/Group Name: ________________________________________________________________

Phone Number: ___________________________________________________________________

Contact Person: _________________________________________________________________

Contact Phone: ____________________ Contact Email: ______________________________

Preferred form of contact: Phone Email Best Time to Reach You: ______________________

Date of expected visit: _____________________ Time: ________________________________

Alternate Date/Time: __________________________________________________________________

# in group: ____________________ # of buses/vehicles: _______________________

Grade Level or Age: ____________________ Number of Leaders/Chaperones: ___________

Special Requests: ________________________________________________________________

To ensure we can continue welcoming day camps and other groups to the farm, we ask for a $5 donation for each participant visiting so we can continue providing brochures and other materials during the visit. **Nonprofit groups (excluding paid programs) fee will be waived.

<table>
<thead>
<tr>
<th>Number of participants</th>
<th>Amount</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$5.00/participant</td>
<td></td>
</tr>
</tbody>
</table>
**DEFHR Educational Financial Assistance Program:**
The DEFHR Educational Financial Assistance Program provides full and partial financial assistance to groups. Financial assistance awards are based solely upon need. Due to limited funds we sincerely hope that application for financial assistance will be made only after careful assessment of your needs. Financial assistances will be on a first-come, first-serve limited basis.

If you would like your group to be considered for the Financial Assistance Program, please contact DEFHR’s Community Outreach Director at outreach@defhr.org.

**Payment Method**

Total Payment: $____________________

- Check
- MasterCard
- Visa
- Discover

Name of Card Holder: _________________________________________________________

Billing Address: ______________________________________________________________

Card #: ___________________________ Exp Date: _____________________________

Payment will only be processed once dates and times of the tour have been confirmed.

Please return your application and payment to:

Days End Farm Horse Rescue / Attn: Nicky Wetzelberger
P.O. Box 309, Lisbon, MD 21765
or Fax to: 301-854-5146 or email to outreach@defhr.org