



# 2016 NAILE SCHOOL GROUP TICKETS ORDER FORM

Group Name \_\_\_\_\_

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Email Address \_\_\_\_\_

What date do you plan on attending the NAILE? \_\_\_\_\_

How many are in your group? \_\_\_\_\_ # of Students  
\_\_\_\_\_ # of Adults/Chaperones

How many vans, buses, etc. do you plan to bring? \_\_\_\_\_

**\*\* Tickets are \$2.00 per person, payable in advance; checks should be made out to NAILE.**

**\*\* Parking for the NAILE is \$8.00 per vehicle and MUST be paid at the gate.**

**\*\* Contact Susan Simmons at (502) 367-5205 or [ssimmons@ksfb.ky.gov](mailto:ssimmons@ksfb.ky.gov) with any questions or concerns.**

Please return this form with payment to:

**NAILE**

**Attn: Susan Simmons**

**P.O. Box 36367**

**Louisville, KY 40233**