

Visit Booking for Institutions & Schools

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For use by Communications Museum		
Opinion:		Approval:
Application: RV		rsonal data collected in this form will be used for the angement of activity, and restricted for internal reference.
Date.		plicant wants / does not want to receive promotional prmation from the Museum.
1. Organization / School Name:		
2. Address:		
3. Contact person:		4. Tel:
5. Fax:		6. Email:
7. Visitors number:		8. Age-class:
9. Accompanies-teachers number:		10. 1st time visit the Museum: ☐ Yes / ☐ No
11. Visit date: d/ m/ y/	′	12.Arrival & leave time: ~
13. Guided service & activity item number:		
14. Special service or need:		

EN_School booking form Version:2020