

THE LIGHTNING FIELD Reservation Form

Name of Contact Person _____

Address _____

Telephone (day:) _____ (eve): _____

(cell): _____

Email _____

Date of Visit _____

Alternative Date(s) _____

(Please provide at least one alternative date in case of scheduling conflicts.)

Visitors in your party (please include yourself and ages of children):

Name	City/Country of Residence
1) _____	_____
2) _____	_____
3) _____	_____
4) _____	_____
5) _____	_____
6) _____	_____

Total number of visitors in your party _____ Fees \$ _____

Contribution \$ _____

Total Enclosed \$ _____

Fees are \$250 per person for July and August, and \$150 per person for May, June, September, and October. Student/Child rates for all months are \$100 per person (please enclose a copy of student ID). The actual cost of maintaining *The Lightning Field* and accommodating visits greatly exceeds visitor fees. Contributions toward the operating expenses of *The Lightning Field* are appreciated, and donations beyond the listed rates are tax-deductible.

Please make your check payable to Dia Art Foundation. Foreign checks must be in U.S. dollars drawn on an American bank. Reservations will not be processed without receipt of full payment. Payments for confirmed reservations are not refundable. You will receive confirmation of your reservation at the email address provided above unless you request otherwise.

Mail this form and your payment to:
(Please call for a Fed Ex delivery address)

The Lightning Field
PO Box 2993
Corrales, NM 87048