SMITHSONIAN INSTITUTION
NATIONAL MUSEUM OF NATURAL HISTORY

DIVISION OF AMPHIBIANS & REPTILES

VISITOR REGISTRATION FORM

Please read the Division of Amphibians & Reptiles' Visitor Information page before submitting your visitation request. Completed forms should be sent to wynna@si.edu.

VISITOR INFORMATION **FIRST NAME:** _____ **LAST NAME:** _____

POSITION: _____ **EMAIL:** _____ **MOBILE #:** _____

INSTITUTION: _____ **DEPARTMENT:** _____

STREET ADDRESS: _____

CITY: _____ **STATE/PROVINCE:** _____ **COUNTRY:** _____

VISITATION START DATE: _____ **VISITATION END DATE:** _____

IF YOU HAVE BEEN REGISTERED AS A SMITHSONIAN VISITOR WITHIN THE LAST 12 MONTHS, GIVE THE DATES:

_____

STUDENTS ONLY **ADVISOR'S NAME:** _____ **ADVISOR'S EMAIL:** _____

TRANSPORTATION **How will you get to the Museum Support Center (MSC) on the first day of your visit?**

☐ Shuttle from NHB ☐ Car

EMERGENCY CONTACT **FIRST NAME:** _____ **LAST NAME:** _____

EMERGENCY CONTACT EMAIL: _____ **EMERGENCY PHONE #:** _____

VISIT INFORMATION **MATERIAL TO EXAMINE:** ☐ Alcohol ☐ Dry ☐ Formalin ☐ Cleared & Stained ☐ Other: _____

PURPOSE OF VISIT & METHODS TO BE APPLIED (photography, digitizing, measurements, dissection, clearing & staining, etc.):

TAXA TO BE STUDIED:

DO YOU REQUIRE THE USE OF SPECIAL EQUIPMENT? (Dissecting scope, microscope with camera, copy stand, x-ray, e.g.)

DO YOU NEED TO EXAMINE TYPES? ☐ No ☐ Yes If "yes", list the types you are requesting to examine: