



MICHAEL B SCHWARTZ LLC

Arts Based Solutions to Community Needs: *Expect More*



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Mural Tour Reservation Form

Name: _____

Group or Organization: _____

Number of people in your party: ____

Email: _____

Phone: _____

I would like to reserve a mural tour on the following Date(s): _____ Time(s) _____

I would like to reserve a Docent Led Mural Tour:

- _____ Downtown Murals: One hour walking mural tour: \$250.
- _____ City Wide Mural Tour: Two Hours (client provides vehicles) \$500.

Payment Methods

\$__ Deposit

\$__ Full Payment

___ Payment Plan: \$___ per month for ___ months.

___ Please Invoice Me



Name on Card: _____

Address: _____

City: _____ State: ___ Zip Code: _____

- 1) **Check** send to: "Michael B Schwartz" P.O. Box 545 Tucson, AZ 85702
- 2) **Online** via Paypal. at www.MichaelBSchwartz.com
- 3) **Email** Fill/Return this form as a PDF to: MBSarts@gmail.com

CREDIT (Circle): Visa MasterCard AMEX Discover

Card #: _____

Code: _____ Exp: ___/___ Add 3% to cover processing fee?: Yes No

Name if different above: _____

Address if different above: _____