



CRYSTAL BRIDGES
MUSEUM OF AMERICAN ART

TRANSPORTATION AND SUBSTITUTE TEACHER REIMBURSEMENT FORM

CONTACT NAME AND PHONE NUMBER	TOUR DATE
TOTAL BUS EXPENSE Documentation Attached? <input type="checkbox"/>	TOTAL SUBSTITUTE TEACHER EXPENSE Documentation Attached? <input type="checkbox"/>
\$ _____.	\$ _____.
CHECK PAYABLE TO (NAME OF SCHOOL)	
ADDRESS TO REMIT PAYMENT	
FOR OFFICE USE ONLY	
District Name _____ Walker-School Visit Program, Trip Reimbursement Total Number of Classes _____ Total Bus Expense (340-6730-000060) \$ _____. Total Teacher Expense (340-6740-000060) \$ _____. 	Reservation# _____ Received _____ Amount _____ Sent _____
APPROVAL	
Department Manager _____ Division Director _____	



TRANSPORTATION AND SUBSTITUTE TEACHER REIMBURSEMENT FORM

Crystal Bridges is thankful for the generosity of the Willard and Pat Walker Charitable Foundation that makes a school visit possible without the barriers of cost associated with transportation, substitute teachers, and a healthy lunch. This program will reimburse your school for the cost of transportation and a substitute teacher, total reimbursement not to exceed \$250.00 per class. If your transportation and substitute teacher reimbursement will exceed \$250.00 please contact school.programs@crystalbridges.org, or call Sarah at (479) 418-5782 prior to your visit to request special consideration for your circumstances.

Instructions:

- 1. Arrange Transportation:** Please arrange transportation to the Museum from your school. The Museum will reimburse a school directly for the cost of bringing students to and from the Museum.
Please note: The Museum reimburses based on the amount charged by the transportation company, but will not directly pay invoices billed to a school from the transportation company.
- 2. Engage a Substitute Teacher:** If a substitute teacher is needed to cover the educators' other classes during the school visit, the Museum will reimburse the cost of one substitute per educator.
- 3. Complete this Form:** Reimbursement requests must be submitted to the Museum no later than 30 days after your tour. Reimbursements will be paid within 30 days of receipt of this form and required documentation.
- 4. Required Documentation:**
 - For Transportation: A copy of the invoice from the transportation company to the school.
 - For a Substitute Teacher: An invoice from the school to Crystal Bridges for the teacher expense.

5. Submit Form and Documentation to Crystal Bridges:

Either email or mail this completed form to
school.programs@crystalbridges.org

Crystal Bridges Museum of American Art
Attn: School Programs Assistant-Reimbursement
600 Museum Way
Bentonville, AR 72712