



Tour Request Form

**County of Hawaii
Parks & Recreation**
Pana'ewa Rainforest Zoo & Gardens
101 Pauahi Street, Suite 6, Hilo, Hawaii 96720
phone (808) 959-7224 * fax (808) 981-2316
panaewazoo@co.hawaii.hi.us

Name of School / Non-Profit Organization: _____

Contact Person: _____

Phone Contact: (day) _____ (eve) _____

E-mail contact: _____

Date of tour: _____ * Time of tour: _____

Arrival time: _____ Departure time: _____

*Indicate time you would like your tour to start, taking into consideration snack/lunch time

Grade level: _____ Number of students _____ Number of Adults _____

Special Focus of Tour: _____

Special Needs Requirement: _____

*Number of docents needed: _____

* We sometimes may not be able to provide the number of docents requested

Fax completed information form to: **981-2316**
or mail to: **Panaewa Rainforest Zoo & Gardens**
101 Pauahi St. Suite #6
Hilo, HI 96720

For more information call: **959-7224**

Requests must be submitted at least two weeks in advance.
Your reservation will be confirmed via e-mail with a follow up call if necessary.

FOR ZOO USE ONLY

Date received: _____ Docents assigned: _____

Comments: