Grand Rapids Art Museum  
College and University Semester Access Request  
New program policy effective August 1, 2020

Please submit this request along with an alphabetized course roster three weeks in advance of the first visit.

Grand Rapids Art Museum - Course Rosters  
101 Monroe Center  
Grand Rapids, MI 49503  
Fax 616-831-1001

The course fee is $5/student. The course fee payment must be collected and paid by the instructor or institution in one lump sum as we are not able to process individual or separate payments for each student enrolled in the course. This fee may be paid by check or credit card. Payment must be accepted prior to your first visit by calling 616-831-2928.

Please contact Emily Jarvi, School Experience Manager, with questions at ejarvi@artmuseumgr.org or 616-831-2928.

Institution: ____________________________

Course title and number: ______________________________________

Course instructor name: ______________________________________

Address: ____________________________________________________

City: ____________________________  State: ____________________  Zip: __________________

Phone: ____________________________  Email: __________________________

Semester & year of request: __________________________

Total number of students enrolled in course: _________  Total course fee amount: __________________________

Visit category (check one):

All categories entitle students and course instructors to have unlimited visits to the museum throughout the length of the semester during the museum’s open hours. Please visit our website at artmuseumgr.org for the current hours of operation.

1) ______ Self-guided (Instructor with class)

   Requested date and time: __________________________

   Group size: __________________________

Are there any individuals with cognitive, emotional, or physical disabilities for which we should prepare? Please detail:

_____________________________________________________________________________________________

2) ______ Individual student admittance throughout the semester

3) ______ Jansma Family Works on Paper Study visit

   Please schedule an appointment for the Works on Paper Study by calling 616-242-5026.

Payment

Please Indicate:  
Check (payable to the Grand Rapids Art Museum)

Credit Card  [ ] Visa  [ ] Mastercard  [ ] Discover/Amex

Name (as it appears on the card): ______________________________________

Credit Card Number: __________________________

Expiration Date: __________________________  Security Code: __________________________

[ ] Receipt of payment requested