Reservation form for the “DIGS”  
Sponsored by Ben E. Clement Mineral Museum

Family/Organization Name _________________________________________________

Contact Person’s Name __________________________________________________

Address_________________________________________________________________

City__________________________ State _____________ Zip Code ________________

Phone number _____________________ (home)

_____________________ (cell)

_____________________ (work)

E-Mail Address__________________________________________________________

We will send a receipt for your registration via e-mail, if you do not have e-mail we will
mail you a receipt.

Please give us your first, second and third choices for a dig date. We limit the public
digs on each date to 30 people. So, be sure and send your registration with the fee early.
You will be required to sign a waiver form before you go on the dig.

1st Choice_______________________________

2nd Choice_______________________________

3rd Choice_______________________________

Do you want to go on the night dig? ________ If yes how many people? ________

The fee for the day dig is $25.00/person. The night dig is $40.00/person.

Number of people for day dig _________ x $25.00 = ________________

Number of people for night dig_________ x $40.00 = ________________

Total Amount Due with registration = ________________

Please mail to: Ben E. Clement Mineral Museum
P.O. Box 391
Marion, KY 42064

If you have any questions please visit our website @ www.ClementMineralMuseum.org
or call the museum at 270-965-4263.