

Visit Request Form

Organization Name _____

Type of Organization _____

Address _____

City _____ County _____ Zip Code _____

Contact Person _____ Telephone _____

Number in Group (LIMIT 10) _____

Age Range _____

Brief description of your group's special need(s). Please include relevant information regarding motor ability, cognitive level, and verbal ability.

State which aspects of the treatment plan or curriculum you would like reinforced through a museum visit (i.e. feelings identification, feeling expression, elements of art, survey of art history, recreation, socialization, sensory awareness, sensory integration, language skill development, etc.)

Number of persons in wheelchairs _____ Number of persons needing wheelchairs _____

Desired Date/Time: _____

Experience in Art

Information regarding your students'/group's experience with art, art materials, and art-making is important for planning a rewarding and relevant visit to the Gallery.

Please answer the questions below to assist us with the planning process:

Art materials or projects your group **has experience with:**

- Paint Clay Sculpture Drawing Puppets
 Mask Making Photography Printmaking Other

Art Materials or projects your group **is interested in:**

- Paint Clay Sculpture Drawing Puppets
 Mask Making Photography Printmaking Other

How familiar is your group in recognizing the elements of art (i.e. shape, line, color, texture, etc.)?

Would you like to concentrate on any of these elements of art, and if so, which ones?

Is there artwork that the group is interested in viewing / learning about (i.e. sculpture, painting, a specific artist, a subject matter such as, portraits, landscape, abstract art, artwork about feelings, etc.)?

If you have scheduled a series of visits, would you like to explore many topic areas?

State your group's ability to use certain materials (i.e. scissors, paintbrushes, markers) OR any materials to avoid?

Please print and mail form to:

Matter at Hand

Education Department

Albright-Knox Art Gallery

1285 Elmwood Avenue

Buffalo, New York 14222-1096