



MARITIME AND HISTORY MUSEUM OF THE CROATIAN LITTORAL
51000 RIJEKA, Muzejski trg 1,
tel: 213-578, 553-666;
fax: 213-578; MB 3321061,
PIN: 06230677933
e-mail: info@ppmhp.hr

GROUPS TO VISIT THE MUSEUM

GROUP INFORMATION

Please enter basic information about the group you bring to the Museum

Group members are:

<ol style="list-style-type: none">1. pupils of elementary school2. high school students3. students4. preschoolers5. foreign tourists6. domestic tourists7. pensioners8. _____	Which place / kindergarten / school / college you are coming from	
	Age / age / grade	
	Number of visitors (1 group = 25 persons)	

Date of visit: _____ **Time**
of arrival: _____

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INFORMATION ON GROUP INTEREST

Please specify the location of the Museum you wish to visit you are interested in

Please specify which part of the museum setup

1. Rijeka, Muzejski trg 1 – Maritime and History Museum of the Croatian Littoral (Governor's Palace)	1. The whole building
2. Kastav, Prolaz Ivana iz Kastva 1 – The Museum Collection of the Kastav Region	2. Homeland wor
3. Lipa, Lipa 35, – Memorial Centre Lipa Remembers	3. Archeology
4. Dobrinj – The Ethnographic Collection of the Island of Krk in Dobrinj	4. Naval History
5. _____	5. Cultural History
	6. Current exhibition: _____
	7. Other: _____

How do you want to visit the Museum:

1. Workshop (duration 90 min) 2. Leadership Visit (duration 30 min) 3. Visit without leadership 4. Other _____	If you have chosen a workshop, please indicate the theme of the workshop
	If you have chosen the lead, state the lead language
	Croatian English Italian

Please specify the payment method:

1. Cash 2. Proforma Invoice

CONTACT INFORMATION
Please provide basic information about your organization and contact person so that we can contact you regarding booking confirmation

Name, headquarters and PIN of organization / agency / school organizing a visit to the Museum:

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Contact person name and last name:

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Mobile phone number:

e-mail:

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Da li jer ista osoba pratitelj grupe?

Yes	No
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If not please provide information about group attendee

Name and last name of the escort:

Mobile phone number:

e-mail:

<input type="text"/>	<input type="text"/>
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Arrival date