Visitor Registration at the North Battleford Western Development Museum

Month:_____ **Year:**_____

			Number in Party						How did you hear about us?													Why did you visit?				
Date:	**Residence: (Where you live)**		Over 65 years	35-64 years	18-34 years	6-17 years	Preschool		Word of Mouth	Highway Sign	Radio	Newspaper	Brochure	Magazine	Television	Internet	Tourism Office	Hotel/Motel	Return Visit	Other WDM		Visiting with Friends/Family	Attending Conference/Business	New Exhibit	Special Event	Something to do