DENVER MINT TOUR REQUEST FORM

The requesting Congressional office is responsible for contacting the visitors in writing and confirming the tour date and time. Please be sure to inform the visitors of all rules and security procedures. The page of rules and regulations is provided below.

Instructions
Complete and submit this via fax to the United States Mint Legislative Affairs Office, Washington D.C. (202) 756-6830 at least 21 days before the requested tour date. Please note: tours are conducted Monday through Friday from 8:00am to 4:00pm. Specific tour times cannot be requested. Necessary security information (Legal Names, Date of Birth, and Social Security Numbers are required for all visitors) must be included with the original request.

The United States Mint Legislative Affairs Office will return the fax to you within five business days of receipt notifying you of the availability of the tour.

The requesting Congressional office is responsible for contacting the visitors in writing and confirming the tour date and time. Please be sure to inform the visitors of all rules and security procedures. The page of rules and regulations is provided below.

For questions, call the United States Mint Office of Legislative Affairs at (202) 354-6700.

Date: _____

Congressional Member's Name: _____

Congressional Tour Coordinator's Name: _____

Phone #'s: _____

Fax #'s: _____

Date(s) Requested: _____

Number of People (1-15): _____

ALL SECURITY INFORMATION SHEETS MUST BE ATTACHED TO THIS COVER SHEET

☐ Request is confirmed for: DATE: _____ TIME: _____ ◯ AM ◯ PM

☐ Request is not available.

Response sent on: DATE: _____ by:_____

Legal Full Name: _____

Male Female

Date of Birth: _____

Social Security Number: _____

IF NOT A U.S. CITIZEN, PLEASE PROVIDE THE FOLLOWING INFORMATION:

Country of Birth: _____

Passport Number: _____

City and Country where issued: _____

==========

Legal Full Name: _____

Male Female

Date of Birth: _____

Social Security Number: _____

IF NOT A U.S. CITIZEN, PLEASE PROVIDE THE FOLLOWING INFORMATION:

Country of Birth: _____

Passport Number: _____

City and Country where issued: _____

==========

Legal Full Name: _____

Male Female

Date of Birth: _____

Social Security Number: _____

IF NOT A U.S. CITIZEN, PLEASE PROVIDE THE FOLLOWING INFORMATION:

Country of Birth: _____

Passport Number: _____

City and Country where issued: _____

Legal Full Name: _____

Male Female

Date of Birth: _____

Social Security Number: _____

IF NOT A U.S. CITIZEN, PLEASE PROVIDE THE FOLLOWING INFORMATION:

Country of Birth: _____

Passport Number: _____

City and Country where issued: _____

==========

Legal Full Name: _____

Male Female

Date of Birth: _ _

Social Security Number: _____

IF NOT A U.S. CITIZEN, PLEASE PROVIDE THE FOLLOWING INFORMATION:

Country of Birth: _____

Passport Number: _____

City and Country where issued: _____

==========

Legal Full Name: _____

Male Female

Date of Birth: _____

Social Security Number: _____

IF NOT A U.S. CITIZEN, PLEASE PROVIDE THE FOLLOWING INFORMATION:

Country of Birth: _____

Passport Number: _____

City and Country where issued: _____

Legal Full Name: _____

Male Female

Date of Birth: _____

Social Security Number: _____

IF NOT A U.S. CITIZEN, PLEASE PROVIDE THE FOLLOWING INFORMATION:

Country of Birth: _____

Passport Number: _____

City and Country where issued: _____

==========

Legal Full Name: _____

Male Female

Date of Birth: _____

Social Security Number: _____

IF NOT A U.S. CITIZEN, PLEASE PROVIDE THE FOLLOWING INFORMATION:

Country of Birth: _____

Passport Number: _____

City and Country where issued: _____

==========

Legal Full Name: _____

Male Female

Date of Birth: _____

Social Security Number: _____

IF NOT A U.S. CITIZEN, PLEASE PROVIDE THE FOLLOWING INFORMATION:

Country of Birth: _____

Passport Number: _____

City and Country where issued: _____

Legal Full Name: _____

Male Female

Date of Birth: _____

Social Security Number: _____

IF NOT A U.S. CITIZEN, PLEASE PROVIDE THE FOLLOWING INFORMATION:

Country of Birth: _____

Passport Number: _____

City and Country where issued: _____

==========

Legal Full Name: _____

Male Female

Date of Birth: _____

Social Security Number: _____

IF NOT A U.S. CITIZEN, PLEASE PROVIDE THE FOLLOWING INFORMATION:

Country of Birth: _____

Passport Number: _____

City and Country where issued: _____

==========

Legal Full Name: _____

Male Female

Date of Birth: _____

Social Security Number: _____

IF NOT A U.S. CITIZEN, PLEASE PROVIDE THE FOLLOWING INFORMATION:

Country of Birth: _____

Passport Number: _____

City and Country where issued: _____

Legal Full Name: _____

Male Female

Date of Birth: _____

Social Security Number: _____

IF NOT A U.S. CITIZEN, PLEASE PROVIDE THE FOLLOWING INFORMATION:

Country of Birth: _____

Passport Number: _____

City and Country where issued: _____

==========

Legal Full Name: _____

Male Female

Date of Birth: _____

Social Security Number: _____

IF NOT A U.S. CITIZEN, PLEASE PROVIDE THE FOLLOWING INFORMATION:

Country of Birth: _____

Passport Number: _____

City and Country where issued: _____

==========

Legal Full Name: _____

Male Female

Date of Birth: _____

Social Security Number: _____

IF NOT A U.S. CITIZEN, PLEASE PROVIDE THE FOLLOWING INFORMATION:

Country of Birth: _____

Passport Number: _____

City and Country where issued: _____