

# Directions to Cincinnati Museum Center

## Public Transportation

The #1 Metro bus brings you right to our front door.

## From the South

I-75 N to US 50 W (River Road/Linn Street), Exit 1D to Gest Street exit (first on left). Turn right on Gest, right at Freeman at first light, and follow the overhead signs for Ezzard Charles Drive.

## From the North

I-75 S to Western Avenue, Exit 2A.  
**OR** I-71 S to I-75 N to Liberty Street/Ezzard Charles Drive, Exit 1G.

## From the West

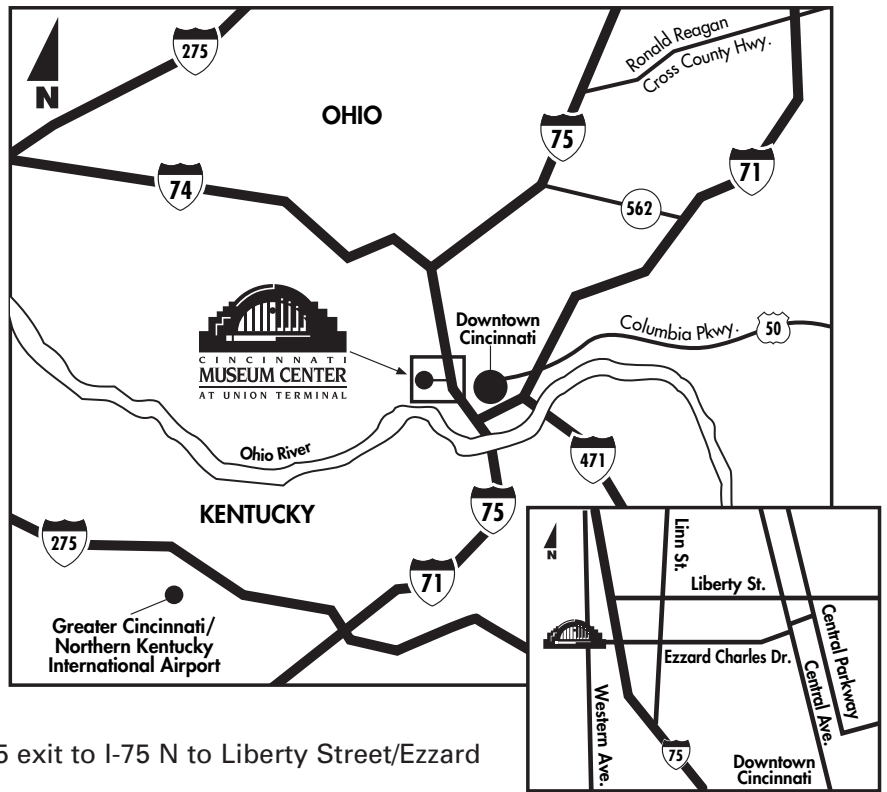
I-74 E to I-75 S to Western Avenue, Exit 2A.  
**OR** US 50 E (River Road) to Freeman Avenue to Ezzard Charles Drive.

## From the East

US 50 W to I-75 N to Liberty Street/Ezzard Charles Drive, Exit 1G.

## From I-471

I-471 N over DCB Bridge, take US 50 W/I-71 & I-75 exit to I-75 N to Liberty Street/Ezzard Charles Drive, Exit 1G.



# School & Youth Group Lunch Order Form

All Selections include bag of chips, jumbo cookie, canned soft drink (Coke, Diet Coke or Sprite) and cup with Ice.  
 To order, call Sodexho at (513) 345-2654 ext. 1 or fax form to (513) 345-2656.

## MENU ITEMS

Selection #1 — "Hot Dog on Bun" with Ketchup and Mustard Packets	Qty _____ @ \$5.50 = \$ _____
Selection #2 — "Grilled Chicken Caesar Salad"	Qty _____ @ \$6.00 = \$ _____
Selection #3 — "Turkey & Swiss Cheese Sandwich" on White Bread	Qty _____ @ \$5.50 = \$ _____
Selection #4 — "Ham & American Cheese Sandwich" on White Bread	Qty _____ @ \$5.50 = \$ _____
Selection #5 — "Individual Pizza Hut Cheese Pizza"	Qty _____ @ \$6.00 = \$ _____
	Sub Total = \$ _____
	+ 6.5% Sales Tax = \$ _____
	Total Due = \$ _____

Groups should make reservations two weeks in advance. A confirmed final count required three business days prior to the visit. Payment (by cash, credit card or check) is due on or before the visit date. Proper advance documentation of group tax-exempt status is required to waive sales tax. One Sodexho employee will deliver food and beverage to the "School Tables" scheduled by Cincinnati Museum Center at the time designated in the reservation. Group Leaders will need to distribute food and beverage items to each individual.

Group Name \_\_\_\_\_ Contact \_\_\_\_\_ Tax Exempt ID # \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

Event Date \_\_\_\_\_ Menu Time \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_