

WILDWOOD OUTREACH BOOKING FORM

Please return this form to: education@wildwoodtrust.org
Telephone: 01227 209 620

CONTACT DETAILS

Organiser's name:	
School/group name:	
Address:	
Telephone:	
Best time to call:	
Email:	

DATE OF VISIT: _____

ACTIVITIES LIST (aimed at average class of 30 children)

<i>Year Level</i>	<i>Workshop (please state which one you would like)</i>	<i>Time of workshop (allow approx. 1 hr)</i>	<i>Class Teacher</i>

Declaration: I undertake to ensure the continuous supervision of the children in my class and will be responsible for their good behaviour during the workshop.