**Education Booking Enquiry**

School Name:

School Address:

Booking Contact Name:

Contact Email:

Contact Phone:

Proposed Date of Visit:

Arrival Time (ETA): Departure Time (ETD):

|  |  |  |  |
| --- | --- | --- | --- |
| Number of attendees: | Students: | Teachers: | Adults: |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Year 1 | Year 2 | Year 3 | Year 4 | Year 5 | Year 6 | Year 7 |
| Year 8 | Year 9 | Year 10 | Year 11 | Year 12 | Year 13 | Adult |

**Focus of your visit:**

**Learning Areas:**

* Maths
* Science
* English
* History

**Activities you would like to include in visit:**

* Social Studies
* Arts
* Tourism & Hospitality
* Languages
* Technology

**List any Special Education needs/requirements:**

**Any other information you would like us to know:**

*Photos of my students can be used by the Pioneer Village Kaikohe for media and marketing purposes:*