

<i>Office use only</i>	Date and time.....	Confirmation <input type="checkbox"/>
Date Confirmed.....		
Contact Name.....	Contact Number.....	
Final Numbers.....	Payment.....	Telephone check <input type="checkbox"/>

BOOKING FORM FOR EDUCATIONAL VISITS WITH
BODHISATTVA BUDDHIST CENTRE

**Please send to the Education Programme Coordinator, Bodhisattva
 Buddhist Centre, 3 Lansdowne Road, Brighton & Hove BN3 1DN
 Phone (01273) 732917
 Email:info@meditateinbrighton.com**

Have we visited your school before? Yes... No...

Has the school visited the Centre before? Yes... No...

Do you wish to visit the Centre? Yes... No... (If yes skip section D).

Or

Do you want us to visit your school? Yes... No... (If yes skip section C).

Section A. Contact details

Name(s) of teacher(s).....

Name of School or College.....

Contact Address.....

Post Code.....

Work Fax.....

Work Tel.....

E-mail.....

Home Tel...../Mobile Tel.....

Section B. Students

Number of students.....Number of staff.....

Age Group

Primary..... → Age..... Key Stage.....

Secondary..... → Age..... Key Stage.....

A Level

Further / Higher Education

Adults with special needs

Have your students studied Buddhism before? If so, please give

details:.....

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.....

Please state the key elements you would like covered, (i.e. topic, include guided meditation, drawing) and what you would like your students to gain from their visit:

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Are there any special requirements your students may have? Please specify.

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Section C. Planning your visit to the Centre

Please note that Mondays and Tuesdays are the best days for us but we are happy to accommodate your schedule.

Date and time of visit:

First choice of date and time (time of arrival and departure)

.....

Second choice of date and time (time of arrival and departure)

.....

Third choice of date and time (time of arrival and departure)

.....

What format would you like the visit to take?

Most common format:

45 minute talk, Q&A and guided meditation

30 minute break with refreshments

30 minute talk and Q&A

Finish with lunch and time in the Peace Garden

Or

Other, please specify.....

.....

.....

Do you want to visit the shop? ...

Do you want to visit the peace garden? ...

Will your students bring a packed lunch? ...

If the answer to the above question is yes, please try to arrange for students to bring a vegetarian lunch.

I have read your Risk Assessment... (Available on our website).

Section D. Planning our visit to your school

Date and time of visit:

First choice of date and time (start and finish time)

.....

Second choice of date and time (start and finish time)

.....

Third choice of date and time (start and finish time)

.....

What format would you like the visit to take? Please describe.

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Time of arrival.....

Name of person or area in school to report to upon arrival.....

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If the visit is over the lunch break is lunch provided?.....

Section E. Payment

The suggested donation is minimum £25 per visit to the centre or if more per person see table below:

Pre School	£1.20/ child
Primary School	£1.20/ child
Secondary School	£1.45/ child
Special School	£1.20/ child
University	£2.50/ student
Adult visit	£2.50/ visitor

If visiting away from the centre then the suggested donation is £30 for half day visit and £50 for full day visit.

I will pay by cash ... cheque...

Section F. Additional Information

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Thank you; please return this form to the Education Programme Coordinator
at Bodhisattva Centre