

School and Colleges Booking Form

About you School Name: School Address (including postcode): Contact Name: Contact Details: (phone and email address) Percentage of pupil premium students at your school: **Your visit** Session Type: Preferred Dates: (please give up to three options)

Preferred Arrival Time: (please note, morning sessions start at 10 am and afternoon sessions start at 1 pm)

Group Leader on the day (if different from contact above). Name and contact mobile number:
our students
Number of Students:
Number of Leaders:
V. C.
Key Stage:
Year Group:
Do any students have additional needs? If yes please provide details which would be useful for session leader to know as part of their planning for your visit:
ailoring your experience
Reason for your visit to The MERL (eg how does the session complement the curriculum, what prior information will your students know about the topic, what are your learning objectives for the visit)

Any other information that would be useful for us to know including details of any access
requirements

Thank you for your booking request. A member of our Learning Team will be in touch shortly to confirm your booking.