

TORPEL VISIT DATABASE—ENQUIRY FORM

Contact date

Contact Name

MR/MS/MRS/MISS/DR

Role

Langdyke Member?

YES/NO

School name and address

School Tel No

E-mail address

Contact details (if different)

Postcode

Nature of Enquiry

Pre-visit

Group visit

Outreach

Date of visit

Topics being studied:

Age/ year group

No. of children

No. of adults

Half/full day

Start time

Finish time

Transport arrangements

Coach

Minibus/ses

Car/cars

Special needs / Disabilities (eg. wheelchair; ADHD; hearing difficulties etc)

Special Requirements for visit (ie. infant food breaks, clipboards, packed lunch space etc)

Lead Teacher's name

Other Teacher's names

Torpel Staff allocated: