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**Booking Form for Schools and Groups**

Group Name:

Visit type : Full Education Workshop/Museum only visit/Museum visit with Tour/Museum visit with tour and throwing demonstration/Raku Firing Workshop/Other

Date of Visit: Start time:

Activity (eg coil pot): Duration of workshop:

Number of students: Age range:

Main Contact Name:

Position:

Address:

Telephone Number:

Email:

Name of main contact on the day of visit (if different from above):

Position:

Mobile number:

Cost to be invoiced (and paid in advance):

Any other special requirements for your visit:

Please complete this form and email it to [education@leachpottery.com](mailto:education@leachpottery.com) . We will then be in contact with you to confirm your booking and your school will be invoiced. Many thanks.