Wessex Rivers Trust

Uniformed Groups Booking Form

Once completed, please email this form to education@wessexrt.org.uk

Group Information

|  |  |
| --- | --- |
| **Name of Group:** |  |
| **Main contact name and role:** |  |
| **Email:** |  |
| **Phone:** |  |
| **Address of group base:** |  |
| **Age of young people:** |  |
| **Number of young people:** |  |
| **Number of adults:** We recommend at least 1:6 (under 8 year olds) and 1:8 (under 14 year olds) |  |
| **Day of the week the group meets:** |  |
| **Time the group meets:** |  |
| **Date:** (please put 3 dates in order of preference) |  |
| **Wessex RT staff member delivering sessions** (to be completed by Wessex RT) |  |
| **Wessex RT staff member’s phone number** (for use on the day of the session only) |  |

Session Information

We can offer riverbank sessions or indoor sessions. Which would you prefer?

Riverbank session [ ]

Indoor session [ ]

Please select the following topics you would like us to cover in priority order (please note we will be able to fit in approximately 1 or 2 activities)

|  |  |
| --- | --- |
| **Activity** | **Order of preference** |
| River dipping (riverbank only) |  |
| Close look at invertebrates (indoor only) |  |
| Water safety |  |
| Water conservation trail |  |
| Water saving games |  |
| Willow fish weaving (8 yrs +) |  |
| Pipe cleaner dragonflies |  |
| Clay invertebrates |  |
| Mini raft building |  |
| Night walk |  |
| Wildlife walk |  |

For Riverbank Sessions only:

|  |  |
| --- | --- |
| **Local river access point address** (if known): |  |
| **Local river landowner details** (if known): |  |

For indoor sessions only:

|  |  |
| --- | --- |
| **Is there parking available for our staff on site?** (Please provide access details) |  |
| **Does the indoor space have the ability to connect laptops to an existing projector?** Please provide details |  |

Other Information

|  |  |
| --- | --- |
| **Are there any children/adults with medical conditions we need to be aware of?** If so, please specify. |  |
| **Are there any children with special educational needs we need to be aware of?** If so, please specify. |  |
| **How did you hear about Wessex River Trust’s education programmes?** |  |
| **Any other comments.** |  |

Are you happy for us to store your personal information to allow us to contact you regarding your river education sessions? (To see our Data Protection Policy visit <https://www.wessexrt.org.uk/policies.html>)

**Yes** [ ]

**No** [ ]

Have you read and agree to all the information provide to you in Wessex Rivers Trust’s School Education Information Pack?

**Yes** [ ]

**No** [ ]

Payment:

**Project invoice assigned to:** Education Schools

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Unit Cost**  | **Number of sessions** | **Total** |
| **Uniformed Group Session** | £60 per group |  |  |
|  |  | **OVERALL COST:** |  |

**Signed: Date:**

(NB. Please type name if digital signature not available)