PALACE OF HOLYROODHOUSE

Version:1.10.0.8

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***Please complete one form per class visiting. We may be able to accommodate concurrent sessions should you wish to visit with 2 classes but this is by request only.***

# School name and address

Version:1.10.0.8

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**School e-mail address**

**School telephone number School type**

*(i.e. state or*

 *independent)*

**Group leader Group leader**

**contact number**

*(on day of visit, either a school issued mobile or the school office number)*

1.

2.

3.

**Potential visit dates AM Session or PM Session**

**in order of preference** *(AM Session is 10-12,*

 *PM Session is 12:30-14:30.*

*Please contact us should you need to arrange different timings)*

**Number of pupils Number of adults providing 1:1 support**

*(maximum of 33)*

**Number of non 1:1 adults Year group**

**Would you like to use the Lunch Room?**

**Requested session title**

**If any pupils in the class have Additional**

**Support Needs, please provide details of**

**this and how we can best support their visit**

**Would you like to join our teachers e-mail list to find out about upcoming events and activities?**

**Contact email for mailing list (if different to above)**

**Privacy Statement**: We are collecting your personal information in order to contact you about upcoming events in which we think you will be interested. You can unsubscribe from these communications at any time. For further information, please see our Privacy Notice at <https://www.rct.uk/about/policies/privacy-and-security>

\*1:1 refers to a Teaching Assistant/Learning Support Assistant or Carer providing individual, essential support.