SCHOOL TOUR REQUEST FORM

Please send this form to tours@stupa.org.au to confirm your booking request.

| SCHOOL DETAILS | | | |
|--|--|---|--|
| School / club name: | | | |
| Teacher name: | | Phone: | |
| Suburb: | | Postcode: | |
| Email: | | | |
| opt-in to receive news & updates | from the Great Stu | ира | |
| TOUR DETAILS | | | |
| Number of students: | Yr level/s: | Date of visit: | |
| Expected arrival time: | Departure time: | | |
| OPTIONAL ITEMS | | TICK | |
| Guided meditation: | | | |
| Pease tick to add a short introduction at no additional cost. Led inside the st | | | |
| Buggy assistance: Please indicate how many students in have mobility issues and require assist | | | |
| Photography: By ticking this box, you are giving perr Great Stupa to take images of your gro | | | |
| Admission prices: \$8 per student teachers / carers free | | | |
| Total number of students | x \$ to | our fee = TOTAL \$ | |
| One payment should be made play cash or card (we do not acce to be sent prior to your visit. | | | |
| Name: | Signature: | | |
| Thank you for your booking request. A booking. Cancellations: if your group of prior to your visit by phone (03) 5446 Scancellation fee will apply. View our cancellation fee. | can no longer atte 7568 or email tour | nd, please advise us at least 48 hours s@stupa.org.au, or a 50% late | |

tours. Please note that this email is not monitored on weekends or public holidays.