**Please complete the following to help us prepare and support your visit. Some data is repeated so that we can store the information separately.**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name of Group Leader** | | | | **Date of visit** | | | | | | |
| **Name of School/Institution** | | | | **Year Group:**  **Age of Students:** | | | | | | |
|  | | | | | | | | | | |
| 1. Has the school visited previously?   Yes No If Yes, Number of times \_\_\_\_\_\_\_\_\_ | | | | | | | | | | |
| 1. How did you find out about the National Holocaust Centre and Museum? | | | | | | | | | | |
| Marketing E-Mail |  | Centre’s Website | | |  | Colleague/friend | |  | Marketing Leaflet |  |
| Other |  | Please state: | | | | | | | | |
| 1. Please indicate (by placing an X in the relevant boxes) the subject you wish your students to focus on during their visit to the Centre. | | | | | | | | | | |
| Art & Photography |  | | History | |  | | RE |  | SMSC |  |
| 1. What topics have your students been studying as part of the curriculum subject identified in (3) and how do these topics relate to the Holocaust? | | | | | | | | | | |
| 1. How have the topics outlined in (4) prepared your students for the visit to The National Holocaust Centre? | | | | | | | | | | |
| 1. How do you intend to follow up the visit to The National Holocaust Centre when your students return to school? | | | | | | | | | | |

Please return the booking form and pre-visit questionnaire to the Bookings Team:

Bookings Team, National Holocaust Centre and Museum, Laxton, Newark, Nottinghamshire NG22 0PA.

Telephone: 01623 867 650 or 01623 836627 Email: bookings@nationalholocaustcentre.net