



THE ROYAL HIGHLAND EDUCATION TRUST

Classroom Speaker Booking Form

Date of Application:	
School Name & Address:	Teacher's Name:
	Tel:
	Fax:
	E-mail:
Class:	Please list 3 preferred dates:
Age/Level:	1.
No. of Pupils:	2.
	3.
Project & Learning Outcomes (please be as specific as possible):	
Any Additional Information:	

RHET may arrange a photograph opportunity during your speaker visit.
If you have any objections to this, please advise us.

Teacher Signature.....

Taking the classroom to the countryside

Royal Highland Centre, Ingliston, Edinburgh EH28 8NB

T: 0131 335 6227 W: www.rhet.org.uk



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For official use

Speaker's Name:		
Speaker's Address:		Tel:
		Fax:
		E-mail:
Date of Visit:		
Time of Visit:		

Project Co-ordinator Name:

Project Co-ordinator Signature:

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