**Developing Reading Course Booking Form**

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| Name and address of school: |  |

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| Course & date required: | | | |
| Name and role of main contact: | Name: | Email and Telephone of main contact: |  |
| Role: |

|  |  |
| --- | --- |
| Names of delegates | Role/ Year Group Teaching Responsibility |
|  |  |

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| Dietary / Accessibility Requirements: |  |
| Please provide any other information that you feel may be relevant. |  |

Please compete all fields above and return by email to [n.parkes@burnleybrow.oldham.sch.uk](mailto:n.parkes@burnleybrow.oldham.sch.uk). We will then confirm your booking and send out pre-course information for delegates.