**COONEANA HERITAGE CENTRE**

 **SCHOOL PROGRAM BOOKING REQUEST FORM 2026**

 **Date: ..............................**

Applicants Name**: …............................................................**

School: **……………………………..**Year/Level: ...............

 Contact Person: …................................................................

(Name, title, email address, phone)...........................................................

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 Date/s requested: …......................................

**CIRCLE SIX (6) ACTIVITIES FOR YOUR STUDENTS**

**INCLUDING TWO OF THE RED STATIONS.**

1. **Washing 2. Home Life**
2. **Schoolroom 4. Lawn Mowers**
3. **Games and dress ups 6. Communications**

(Telephones, typewriters, newspapers)

1. **Coal Mining 8. Spinners/Weavers**

1. **Blacksmiths** **10. Motorcycles**

**WHEN ACTIVITIES SELECTED AND APPROVED A FULL SITE**

**RISK ASSESSMENT TO BE COMPLETED BEFORE THE PLANNED EXCURSION.**

**LET US KNOW OF ANY SPECIAL REQUIREMENTS FOR YOUR STUDENTS!!!!!**

**Bookings: email:** Education Coordinatorsipswichhistoricalsociety@gmail.com

**One month in advance**