

# Group Visit Enquiry Form



Name of school/Organisation			
Address			
Telephone number			
Email address			
Name and contact details for person making the enquiry		Email:  Telephone/mobile number:	
Name and contact details for group leader on the day.		Email:  Telephone/mobile number:	
Requested Date for visit-		<i>Please note dates are subject to confirmation due to tide &amp; guide</i>	
Estimated time of arrival			
Have you visited Lyme Regis Museum before?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, date of last visit?	
		If no, what has prompted your visit?	
Any special area of interest... Mary Anning, Civil War, Fossils			
Age range of group			
Number of pupils/students		Number staff	
How did you hear about us		Word of Mouth <input type="checkbox"/> Our Website <input type="checkbox"/> Social Media <input type="checkbox"/> Leaflet <input type="checkbox"/> Poster <input type="checkbox"/> Other <input type="checkbox"/>	
Any additional information you think we should know:			

**PLEASE COMPLETE AND RETURN TO:**

Bridget Houseago (Operations Manager) E: [bhouseago@lymeregismuseum.co.uk](mailto:bhouseago@lymeregismuseum.co.uk)

Lyme Regis Museum, Bridge Street, Lyme Regis D T7 3QA. T: 01297 443370

Chris/Guide		Invoice		Educ Room		FDesk Diary		Booking Sheet	
BKD									

Museum Use Only