

|  |
| --- |
| **Year 12 Guided Campus Visit Booking Form – 2019/20** |
|  |
| **School Name and Address (including postcode)** |  |
| **Contact Name** |  |
| **Email Address** |  |
| **Contact Number (to be used on the day of visit)** |  |
| **Year Group Attending and number of pupils** |  |
| **Number of Teachers Attending** |  |
| **First Choice Date** |  |
| **Second Choice Date** |  |
| **Would you like to attend the Art of Application session?** |  |
| **Additional Information** |  |

Read our [privacy notice for participants in pre-university events and initiatives](http://documents.manchester.ac.uk/display.aspx?DocID=37247)