**Visit Request**

**Bristol & West Progressive Jewish Congregation**

**43-47 Bannerman Road**

**Bristol BS5 0RR**

**Name of School/Group ……………………………………………………………………………**

**Address ……………………………………………………………………………………………………**

**Teacher/Group Leader Contact ……………………………………………………………….**

**Teacher’s/Leader’s Position ...………………………………………………………………….**

**Telephone Number of School/Organisation.…………………………………………….**

**Email of School/Organisation.………………………………………………………………….**

**Mobile Contact for Group Leader ……………………………………………………………**

**Approximate Number of Pupils/Group.……………………………………………………**

**Year Group/Age Range ……………………………………………………………………………**

**Particular reason for visit, if any ………………………………………………………………**

**What, if any prior knowledge do the Pupils/Group have of Judaism?
 ….……………………………………………………………………………………………………………..**

**Please list any specific topics you wish to be covered: ………………………………**

**Please select:**

**……. Visit to the Synagogue**

**……. Session at School or other venue**

**……. Virtual Session**

**-We ask for £50 per session, which will go toward the upkeep of the synagogue.**

**-Please return this form by email to** visits@bwpjc.org**. Thank you.**