

Contact Details:

Name: _____

Email: _____

Telephone: _____

Organisation: _____
(if applicable)

1. Workshop Title: _____

2. Workshop Content (brief description):

3. Preferred days of the week: _____

4. Preferred workshop time (availability: Mon-Fri 10am-12pm; 2pm-6pm): _____

5. Proposed workshop duration (hours): _____

6. How many workshops would you like to hold in total? How frequently? _____

7. Are there any potentially hazardous materials involved in your workshop? Please specify:

8. Ideal number of participants: _____

9. Number of Workshop Leaders: _____

10. Cost per participant: _____

11. Do you have any experience working in a similar capacity? Yes/No

(if Yes, please provide more details):

