

BOOKING FORM 2023/2024

01223 331875 Cambridge University Botanic Garden, 1 Brookside, Cambridge CB2 1JE

Higher Education visit

Pre-booked self-led visits are welcomed and free. Please book early to secure your preferred date and no less than 1 week in advance.

Once arrangements have been agreed, please complete ALL sections below and email to education@botanic.cam.ac.uk.

Tutors who would like to familiarise themselves with the Garden before their booked visit free of charge, can arrange this by contacting education@botanic.cam.ac.uk.

| • | | | | | |
|--|----------------|-----------------------------|-----------|---|--|
| *Higher Education Institute: | | | | | |
| *Address: | | | | | |
| | | | | | |
| *Postcode: | | | *Tel | ephone: | |
| *Lead Tutor: | *Name: | | | | |
| | *Mobile: | | | | |
| | *Email: | | | | |
| *Day, Date and Type of Visit: | (Day) | (DD/MM/YYY) | Visit | isit Type: Bespoke assisted / Self-led | |
| *Time of visit: (Garden opens 10am) | Start: Finish: | | | | |
| *Number of Students: | | | | Special requirements: | |
| *Level (eg 1 st yr undergrad; postgrad): | | | | | |
| *Number of staff: | | | | | |
| *Degree/module studied: | | | | | |
| *Purpose of visit: | | | | | |
| Office use: OC: G/L: S/S: S D/B: EdO: R: | | | | | |
| NOTES: | | | | | |
| booking request. | information a | bove. I agree to abide by t | the Garde | m. Please sign the disclaimer below to confirm your n's Guidance Notes for Educational visits. I agree to | |
| Signed: | | (Lead Tutor) | | Date: | |