



CHUNG TIAN BUDDHIST TEMPLE

School/Group Guided Tour Booking Request

for groups of 8 or more

SCHOOL/GROUP NAME:			
Date : _____		Start time : _____ Finish time: _____	
Bookings are Tuesday to Friday		Start at 9.30 or 10am; must finish by noon (2 hours recommended)	
No. in Group:		No. of Teachers:	No. of Parents/Carers:
School year: _____ adults <input type="checkbox"/> seniors <input type="checkbox"/>		Type of visit: <input type="checkbox"/> Religious <input type="checkbox"/> Cultural	
Contact Person:			
Phone :		Mobile :	
Fax:		Email:	
Address:			
Objective of tour:			
<i>Special Requests or requirements:</i>			
<i>Registered by</i>	<i>Tour guide</i>		<i>Date</i>

Guidelines for Tour Groups

Chung Tian Buddhist Temple conducts tours for community groups such as schools, associations and clubs. The tours of the temple's buildings and grounds include an introduction to Buddhism and important aspects of Chinese Culture. **Tours must be booked six weeks in advance** to enable coordination and scheduling of our Guides who are volunteers. Please be advised that the temple is closed to the public on Mondays. Chung Tian is a non-profit organisation and all donations are appreciated as they enable us to continue our work. In order to facilitate an enjoyable and informative visit to Chung Tian, we request that you take note of the following guidelines:

1. Please contact the Temple in the week prior to your visit to confirm numbers.
2. The temple is the Venerables' place of worship and visitors are expected to dress appropriately and conduct themselves accordingly. Teachers are responsible for the discipline of their students.
3. Please ensure that any outside food brought into the temple is vegetarian and does not contain meat, fish or seafood. Visitors must dispose of their own rubbish offsite.
4. Visitors are responsible for the security of their personal property. Lockers are provided for this purpose. The temple will not accept liability for any losses. **School bags should be left on the bus.**

Omitofo

Signature of Contact Person: _____ **Date:** _____