



# The Chung Wah Association Inc.

Admin Office: 128 James Street, Northbridge WA 6003, Australia  
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## SCHOOL VISIT BOOKING FORM (HIGH SCHOOL)

Date & Day of Visit: \_\_\_\_\_

SCHOOL NAME: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Post code: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone No: \_\_\_\_\_

Fax No: \_\_\_\_\_ Email: \_\_\_\_\_

Year Level: \_\_\_\_\_ No of Students: \_\_\_\_\_

Start Time: \_\_\_\_\_ Finish Time: \_\_\_\_\_

2nd Session: \_\_\_\_\_ Finish Time: \_\_\_\_\_

Activities Available (Please tick for inclusion in visit):

[refer to general information sheet]

- |   |  |
|---|--|
| <input type="checkbox"/> Hall Tour              | <input type="checkbox"/> Visit a Chinese Herbalist     |
| <input type="checkbox"/> Northbridge Trail      | <input type="checkbox"/> Chopsticks & eating etiquette |
| <input type="checkbox"/> Chinese Calligraphy    | <input type="checkbox"/> Abacus                        |
| <input type="checkbox"/> Tai Ji (shadow boxing) | <input type="checkbox"/> Lion Dance                    |
| <input type="checkbox"/> Chinese Zodiac         | <input type="checkbox"/> Qi Gong (Meditation)          |
| <input type="checkbox"/> Paper making           | <input type="checkbox"/> Oral history                  |

Special request: \_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**COST: \$2.00 plus GST per hour of visit  
(Cheque payable to Chung Wah Association)**

**Please return this form to the Association Office to confirm Visiting Date**