

SCHOOLS PROGRAM BOOKING FORM



School Details

School	
Address	
Suburb	
Postcode	
State	
Phone Number	

Teacher Contact Details

Contact Person		
Email		
Phone		
Select your preferred contact method	Email	Phone

Class Registration Details

	Class 1	Class 2	Class 3
School year	Year 5 Year 6	Year 5 Year 6	Year 5 Year 6
Approx. number of students			
Approx. number of teachers			
Preferred date/s	Preferred	Preferred	Preferred
	Alternate	Alternate	Alternate

Additional information or requirements	
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I accept the [Terms & Conditions](#)
I agree to arrange transport to and from the ATCO Gas Blue Flame Kitchen at our own cost.



Please complete this form to register your class for the ATCO Gas Blue Flame Kitchen Schools Program

Once complete please email it to enquiries@atcogasbfk.com.au
www.atcogasbfk.com.au/schools-program



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