'Crossing the Bridges' Place of Worship Feedback Form (Host Version)



Venue	School
Contact	Contact
Host	Year Group
Date & Time	Number of pupils
Did you have enough information fro If you answered no, what else would	om the school prior to the visit? YES / NO A you like to have known?

Were there any things you learned from the visit that you would do differently next time? YES / NO Please give details











