

REQUEST FOR "THiNK TWiCE" PRESENTATION



**THiNK TWiCE**  
Community Education Team



School/organisation:

Street address:

Contact name:

Position:

Phone:

Best time to contact:

Fax:

Other: (mobile or email)

We are interested in a THiNK TWiCE presentation in term	1	2	3	4
for students in year	10	11	12	

Estimated number of people:

Preferred day and time:

(NB. To allow for travel time and speakers needs, please do not request presentations before 10.00am)

Venue for presentation (if known): \_\_\_\_\_

Is the venue wheelchair accessible? YES /NO

We would / would not be interested in the visit being covered by our local media – newspaper name:

What exposure to road safety issues have the students had in their curriculum to date?

To your knowledge, do any of the students have personal experiences with brain injury (particularly due to road trauma)?

I understand that the programme is videotaped for educational purposes and to give feedback to the participating speakers. Students may be filmed in this process however confidentiality will be maintained.

Signature:

Date:

**PLEASE FAX BACK TO THiNK TWiCE on (02) 9635 8892**