**The Lincolnshire Show Schools’ Challenge 2025
Confirmation of Challenge Entry Form**

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| --- | --- |
| **School Name**  |  |
| **School Address**  |  |
| **Lead Teacher Name**  |  |
| **Key Stage** |  |
| **Email Address**  |  |
| **Phone Number**  |  |
| **Primary Schools Only** - please indicate how many pupils attend your school |  |

* I wish to confirm our entry for the Schools’ Challenge. **My Chosen Challenge(s) is/are:**

………………………………………………………………………………………………………………………………………

* I would like to attend **The Schools’ Challenge Launch Event** Yes No

**Wednesday 22nd January 2025 4pm-6.30pm**

During this free event, you will have the opportunity to gain valuable tips and advice from Schools’ Challenge ambassadors and experts in the field, along with guidance and resources to support a successful entry.

The attendee(s) for the event are……………………………………………………………………………….

* I am aware that on challenge confirmation I will be sent a list of contacts of **Schools’ Challenge Ambassadors** who can support and give advice for the challenge I have selected. It is down to the school to make this contact.

Yes No, but now I do!

* Please indicate **how you will be embracing the challenge chosen** e.g. as a year group/class/whole school, after school club, post SATs project, nurture club etc.

……………………………………………………………………………………………………………………………………..

* Please confirm/estimate who will be participating, for our records:

Number of students………………………................................................................................................................

Age of students…………………………...…………………………………………………………………………………

Male/Female split……………………………………………………………………………………………………………

**Post:** Suzy Stone, Education Department, Lincolnshire Showground, Grange-de-Lings, Lincoln, LN2 2NA
**Email:** sstone@lincolnshireshowground.co.uk or education@lincolnshireshowground.co.uk

**Phone:** 01522 585509 / 07850 938950