

Permission Slip for Year 6 Design and Technology Healthy Eating Cooking Project

I confirm that I have parental responsibility for Class

He/she is in good health and I consider him/her to be capable of taking part in the activities detailed in your letter dated 14th June 2018.

Please record below any changes to food allergies or intolerances that your child has since September.

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.....

PAYMENT:-

I enclose a voluntary contribution of £.....

(please tick appropriate box)

Cash

Cheques (payable to H.C.C.)

Payment has been made online
www.scopay.com/netleyabbey-jun

All monies to be paid by **Friday 6th July**

Signed:

Print:

Date: