



# SUDLEY INFANT SCHOOL



Dear parents and carers of Blackbirds, Dippers, Kingfishers and Nightingales,

Every Wednesday afternoon your child will be taking part in a Healthy Food and nutrition session. During this session each week the class will be divided in two, 15 children will be researching and writing about the dish they are going to make and the other half of the class will be making and tasting the dish. These sessions are a great way for children to understand where food comes from and how it is prepared. Mrs Haake and Mrs Dow will lead these sessions. We are seeking permission from you for the child to take part in these activities and would appreciate if you can get these forms back to us **by Monday 9 September**. All ingredients will be provided by school.

**Week 1 & 2 September 11 & 18 – Popcorn**

Corn, sea salt, veggie oil, butter and honey

**Week 3 & 4 September 25 & October 2 -- Veggie snack**

2 celery sticks ½ small cucumber 1 yellow pepper 1 red pepper, 15ml spoons houmous, 1 x 15ml spoon natural yogurt small bunch of chives

**Week 5 & 6 October 9 & 16 – Sandwich wrap** 25g cheese ½ carrot 1 tomato

A handful of lettuce 1 large tortilla

**Week 7 & 8 October 23 & November 6 - Pitta Pockets**

2 wholemeal or white pitta breads 3 lettuce leaves, 8 strips of red pepper, 4 slices cucumber 100g cheese 2x 5ml spoon tomato relish

**Week 9 & 10 November 13 & 20 – Strawberry/pineapple smoothie**

6 large strawberries/tin of pineapple in fruit juice 300ml cold milk 1 small pot of fruit yogurt

**Week 11 & 12 November 27 & December 4 – Cheese straws**

100g plain white flour, a large pinch of mustard powder, 50g margarine 50g mature Cheddar cheese 1x 15ml spoon cold water



**PARENT/CARER PERMISSION FORM** Please return to the school office or staff on the doors as soon as possible – thank you. We require a signature from parent/s/carer/s where the child is resident on the dates above.

In the case where residency is shared and your child stays at different addresses at different times we require both signatures. We ask and expect parent/carers in this instance to liaise with each other regarding these activities.

Child's name:

Class:

Parent/carer sign here

Name:

Date:

Parent/carer sign here

Name:

Date:

I wish/do not wish my child to taste/make the above food. (Delete as appropriate)

Any queries please call into the office/ring us or speak to a member of staff on the door. Please state your child's food allergies here.....

Please state any beliefs that would affect your child in taking part in these activities