



Miss S Neary

Thursday 23rd June 2022

Dear Parent/Guardian

I am writing to let you know that your child will be undertaking a range of food activities to support their learning and development. We will be tasting and cooking with a variety of ingredients, all of which will be suitable for the children.

I would be grateful if you would complete and return the slip below by Tuesday 28th June 2022.

Please do not hesitate to contact me if you would like to discuss this further.

Best wishes

Year 1 Team

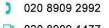


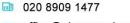


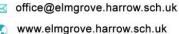
Kenton Harrow HA3 8LU













Year 1 - Ingredient check slip

| □ Does not have food allergies/ intolerances or any other re □ Does have food allergies/ intolerances and other reasons the table below.) | - |
|--|--|
| Complete this of allergy. | column ONLY in the case of severe |
| | severe allergy and the following food(s) bught into my child's classroom or used by assroom: |
| | |
| ☐ I agree to my child wearing a plaster or plastic gloves to enthey have a cut or skin condition on their hands on the da | |
| Parent/carer name (PRINTED: | |
| Parent/carer signature: | |

These are some of the fruits we will be using. Please 'x' any food your child is allergic to.

| Fruits | 'x' allergic |
|---------------|--------------|
| Mango | |
| Strawberry | |
| Papaya | |
| lychee | |
| Passion fruit | |
| Sharon fruit | |
| Star fruit | |
| lemon | |
| grapes | |
| pineapple | |
| Dragonfruit | |
| melon | |
| physalis | |
| kiwi | |



