

14th September 2016

 Codsall Middle School, Wolverhampton Road
 Codsall, Staffordshire WV8 1PB

Tel: 01902 843177 Fax: 01902 841648

Email: office@codsall-middle.staffs.sch.uk

Headteacher: Mr P J Bowers MAEd

Grandparents Day Lunch 2016

Dear Parents/Carers

To celebrate Grandparent's Day our catering team are inviting all grandparents to come to school and enjoy a lunch with their grandchild/children on the week commencing 3rd October 2016.

The cost of an adult meal is £2.70 and each child's meal is £2.20 payable on the day. Grandparents are invited in on three different days as we do not have the capacity to host everyone on the same day. Please note numbers are limited to 50 grandparents each day on a first come first served basis. We will contact grandparents to discuss alternative days if necessary. Please select the most convenient date for you on the reply slip below.

 Monday 3rd October – 12.00 noon

 Tuesday 4th October – 12.00 noon

 Wednesday 5th October – 12.00 noon

For those grandparents with more than one grandchild in school, please select one day and you will be able to eat together as a family.

On the day of your lunch we would like to ask you to arrive at school at 11.55am prompt. During the morning your child/children will be given your family's ticket for lunch and will be released early from lesson 3 to accompany their guests to the dining room. This will allow all guests to be seated and enjoy their meal before the main lunch time commences for the rest of the school.

The deadline for returning booking forms is Friday 23rd September 2016 so the catering team can order enough supplies. We look forward to welcoming as many grandparents as possible during this week.

Kind Regards

Mrs P Baker
Deputy Head Teacher

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Grandparents Lunch 2016

Pupils Name _____

Class _____

Sibling from different year _____

Class _____

 Please circle day Monday 3rd

 Tuesday 4th

 Wednesday 5th

Please Reserve _____ Adult meal at £2.70 each

Please Reserve _____ Child meals at £2.20 each

PAYMENT DUE ON THE DAY PLEASE DO NOT SEND MONEY IN BEFOREHAND
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 My child/children are entitled to a free school meal please tick if appropriate

Signature of person with Parental Responsibility _____ Date _____