Our Ref: 127/16

17th October 2016

Dear Parent/Carer

KS3 Astronomy Club permission letter

Your son would like to take part in Astronomy Club that the St Margaret's Science Department is running.

The club will be taking place on **Monday's afterschool** from **3.15-4.00pm** in **Room 16**.

Please let me know if are happy for your child to attend this club by completing the form below and returning it to the Science Office.

Yours faithfully

Mr S.Martin Teacher of Physics

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REPLY SLIP TO: Mr S Martin, Science Office by Thursday 20th October 2016

Name: _____

Form:_____

I give permission for my son to attend the Astronomy Club on **Monday's from 3.15-4.00pm.**

Telephone No. for emergency contact: _____

Signed:	_(parent/carer)	Date:
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