

February 2018

Dear Chef

**Year 8, 9 and 10 Cookery Club**

This half term we are going to focus on more hearty and healthy meals. These dishes will complement this time of year and will provide plenty of nutrients to keep our bodies and minds healthy. As we head closer to Easter we will bake some delicious Easter treats to share with our families and friends. We of course will continue to improve our skills and understanding within the kitchen, as well as enhancing our knowledge of different recipes.

The club will run for six weeks on Thursdays after school (3.35-5pm), starting on Thursday 22<sup>nd</sup> February:

- Week 1            22<sup>nd</sup> February            Sausage Casserole
- Week 2            1<sup>st</sup> March                 Herby rice and Roasted vegetables
- Week 3            8<sup>th</sup> March                 Chicken and Leek Pies
- Week 4            15<sup>th</sup> March                Sweet Potato and Lentil Curry
- Week 5            22<sup>nd</sup> March                Easter Chocolate Cupcakes or Chocolate Easter Nests
- Week 6            29<sup>th</sup> March                Simnel Muffins or Hot Cross Bun Muffins

**Recipes will be on the portal: School Life > Extra-Curricular > Cookery Club**

*If there are any ingredients that you are unable to get please see me before the next session so that I can arrange to get them in for you.*

To attend the club you must complete and return the attached consent form to me by Thursday 22<sup>nd</sup> February or place it in the box in C1. Places are limited and will be allocated on a first come first served basis. As budding chefs a professional approach to the club is expected along with a positive attitude. I look forward to welcoming you to Cookery Club.

**Miss L Green**

**Year 8, 9 and 10 Cookery Club**

I am happy for (Pupil's Name)..... Tutor Group.....  
to attend Cookery Club on Thursdays after school, 3.35-5pm starting on 22<sup>nd</sup> February for six weeks. I am happy with the information provided for me by the school and am not aware of any medical reasons why my child should not take part in the activity.

They have/do not have any special dietary needs or allergies. *Please delete as appropriate and give details of any dietary needs/allergies below:*

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Signed (Parent/Guardian)..... Date .....

*Please return slip to Miss Green or place in the box in C1.*