9th November 2018

Dear Parent / Carer,

At the end of the school day we are having SEAL time, as part of this pupils can choose what they would like to take participate in. We are holding beauty sessions for those who would like to take part. Would you please sign and return the permission slip below giving consent, also if you could let us know if your child has any allergies to makeup products.

Thanking you in this matter.

Yours sincerely

**R Lewis**

Mrs R Lewis

Teaching Assistant

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**Please return to Hope High School:**

I give permission for my child …..………………………………………………….

to have makeup / nail varnish applied in school, last lesson of the day as part of our SEAL activities.

Allergies……………………………………………….

Signed …………………………………………………….. Parent / Carer

Dated ………………………………………………………