





THE FORDLEY FACTOR

	WEDNESDAY 4TH NOVEMBER 2015
T H E A C T O R T H E	Your child has been selected to take part in this years FORDLEY FACTOR on Wednesday 4th November at 5:30pm.
	Please complete the reply slip below and return to the office as soon as possible.
X	Thank you
A C T O R	Miss K Dixon Teacher
A C T O R	THE FORDLEY FACTOR REPLY SLIP
X	Name of childClass
THE	I give permission for my child to take part in the FORDLEY FACTOR
	I do not give permission for my child to take part
	SignedParent/Carer
A C T O R	
W	