



Dear Parents/Carers,

As part of our DT unit, we are designing, making and evaluating a healthy wrap. On **Wednesday 21st October** we will be making our own wraps in class. On Wednesday morning, please can your child bring their chosen filling into school in a **named container**. We will provide their wrap. If your child has any dietary requirements or you have any concerns regarding this activity, please let me know.

Many thanks,

Mrs McAndrew

Name:

My chosen filling: