



PARISH CHURCH OF  
ST. MARY THE VIRGIN  
OXENHOPE

# Oxenhope

## Church of England Primary School

BELIEVE AND ACHIEVE



Dear Parents,

### Sponsored walk Wednesday 24th June, 2009

Our sponsored walk in aid of Epilepsy Research UK will be taking place on Wednesday 24<sup>th</sup> June during the school day and we very much hope that all children in school will be able to take part.

A map showing the route, which will be no more than 6 km for Key Stage 2 children and no more than 3 km for Key Stage 1 children, will be sent to you in the near future. In the meantime, please sign and return to school the slip below, giving your child permission to take part. I also enclose a sponsor form, which I would be very grateful if you would encourage your child, to use to raise any amount of money, however, small, to contribute to the fundraising.

There will be no hot school dinners served on that day, as it is envisaged that the walk will take most of the day and will include a picnic, so all children will need a packed lunch on that day. The school meals service could provide a basic packed lunch for anyone eligible for free school dinners if required. **Please let me know by Monday 8<sup>th</sup> June at the latest if you will require this packed lunch.**

Further details of the route and the timing of the day will follow and in the meantime, please return the permission slip by Friday 12<sup>th</sup> June. Finally, thank you to the parents who have offered help. We would still like more volunteers to walk with us and help with the organisation of the event, so if you have not done so already, please complete the form below.

Many thanks for your support.  
Alison Driver

I give/do not give permission for my child ..... in .....class to take part in the sponsored walk on 24.6.09

My child always has packed lunches/ will bring their own packed lunch / would like a packed lunch provided by the school meals service. Sandwich required: meat/cheese (please delete as appropriate).

I would like to help with the event /walk with my child (please delete as appropriate)

Name ..... Signed.....

Date.....

Diocese of Bradford  
City of Bradford Metropolitan Council

Headteacher:  
Mr Mike Wragg B.Sc.

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Healthy School



# SPONSOR FORM

Name: \_\_\_\_\_

Event: \_\_\_\_\_

**Every pound you give in sponsorship will support vital research into the causes and treatment of epilepsy, a condition that affects over 456,000 people in the UK. Thank you for your support!**

## SPONSORS

- Cheques or CAF vouchers should be made payable to **Epilepsy Research UK**.
- To pay by CAF card/Visa/MasterCard/Switch/American Express telephone Epilepsy Research UK on 020 8995 4781
- **To Gift Aid your donation** fill in all the details below, including your home address, and tick the Gift Aid box. \*See note below.
- We will not add your name to our mailing list unless you tick the 'Add to Mailing List' box requesting us to do so.

NAME BLOCK CAPITALS	HOME ADDRESS BLOCK CAPITALS	AMOUNT GIVEN £	DATE GIVEN DD/MM/YY	GIFT AID GIVE HOME ADDRESS	ADD TO MAILING LIST
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\* **Gift Aid.** Epilepsy Research UK can reclaim the tax on your donation through Gift Aid at no additional cost to you. For your donation to be eligible you need to be a UK tax payer paying income tax or capital gains tax equal to or more than the amount Epilepsy Research UK reclaims on your donation (currently 28p per £1).

**PLEASE RETURN THIS FORM AND ALL SPONSOR MONEY COLLECTED TO EPILEPSY RESEARCH UK AFTER THE EVENT**