DELIA MEMORIAL SCHOOL (BROADWAY)

Notice to Parents / Guardians

4th September, 2018

-	n . /		1.
l lear	Parent /	(T119r	dian
_ cui	I al CIII /	Ouar	alan,

Dear I arei	nt / Guardian,					
	S3-S4 Pho	nics Study Cours	e 2018 -2019			
Your child	l / ward	of Class	() will take	e part in the Phoni	cs Study	
Your child / ward of Class () will take part in the Phonics Study Course at school. It can improve his / her English and also useful in studying other subjects.						
			•	3		
	who are admitted to this course	have to:				
	00 course fee; immediately to Ms. Cheng N	Iga Man Nichola	and submit the	e doctor's certific	cate and	
parent's	s letter to her on the following	day, if he/she is ab				
	working and submit homework t least 80% of attendance can b		ourse fee.			
ı					7	
	Date		Time	Room		
	Sep: 27 th		3:45 – 5:15	217A		
	Oct: 4 th , 11 th					
	Nov: 15 th , 22 nd , 29 th					
	Dec: 6 th , 13 th					
	Jan: 3 rd	(Thursday)				
attend the	ow your child / ward to join to lessons punctually. Please and later than 7 th September, 201	also return the A	greement Form			
			Yours faithfully,			
				Lo Xa	U	
			K	C.C. Lo		
			P	rincipal		
		·····×-				
	Rep	ly slip (PN_1819	_013)			
Re: S3-S4	Phonics Study Course 2018 -2	019				
			Da	te:Septembe	er, 2018	
Dear Mr. I	Lo,					
I hereby c	onfirm that I have read and fu	lly understood the		and I agree my chatake part in the		

course and pay \$200 for the course fee. I will instruct him / her to attend the lessons punctually.

Name of Parent / Guardian:

Signature: