

DELIA MEMORIAL SCHOOL (BROADWAY)

Notice to Parents / Guardians

Date: 14th September, 2018

Dear Parent / Guardian,

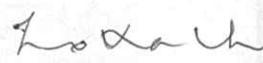
Hong Kong Athletics Series 2018 - Series 4

Your child / ward has been selected for the Hong Kong Athletics Series 2017 - Series 4. The detail as follows:

Name of competitions	Hong Kong Athletics Series 2018 - Series 4
Organizers	Hong Kong Amateur Athletic Association
Date	22 - 23 September 2018 (Saturday & Sunday)
Time	8:00 am-5:00 pm
Venue	Wan Chai Sports Ground

Please sign the letter appended below as an agreement for your child / ward to contest in the events. The signed letter should be returned to **LI KA CHUN** on or before **20th September, 2018**.

Yours faithfully


 Lo K.C.
 Principal

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Parent's Agreement Letter (PN_1819_018)

Re: Hong Kong Athletics Series 2017 - Series 4Date: September, 2018

Dear Principal,

I **agree** my child / ward _____ of S _____ (), to participate in the competitions of the **Hong Kong Athletics Series 2018 - Series 4**.

Students should be aware of their health conditions and consider whether it is suitable for them to enroll in this competition. In case of doubt, please consult a doctor prior to the enrollment of competition.

I declare that: I am / My Child is healthy, physically fit, and suitable to participate in the above activity. School shall not be liable for any injury or death which I may suffer in this activity. If the cause of injury or death is due to my own negligence or inadequacy in health and fitness.

Signature of Parent / Guardian: _____

Name of Parent / Guardian: _____

DELIA MEMORIAL SCHOOL (BROADWAY)

Notice to Parents / Guardians

Date: 14th September, 2018

Dear Parent / Guardian,

ASICS Hong Kong Junior Age Group Athletic Championships 2018

Your child / ward has been selected for the ASICS Hong Kong Junior Age Group Athletic Championships 2018. The detail as follows:

Name of competitions	ASICS Hong Kong Junior Age Group Athletic Championships 2017
Organizers	Hong Kong Amateur Athletic Association
Date	13-14 October 2018 (Saturday & Sunday)
Time	8:00 am-5:00 pm
Venue	Wan Chai Sports Ground

Please sign the letter appended below as an agreement for your child/ward to contest in the events. The signed letter should be returned to **LI KA CHUN** on or before **20th September, 2017**.

Yours faithfully



Lo K.C.
Principal

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Parent's Agreement Letter (PN_1819_018)

Re: ASICS Hong Kong Junior Age Group Athletic Championships 2018

Date: September, 2018

Dear Principal,

I **agree** my child / ward _____ of S_____(), to participate in the competitions of the **ASICS Hong Kong Junior Age Group Athletic Championships 2018**.

Students should be aware of their health conditions and consider whether it is suitable for them to enroll in this competition. In case of doubt, please consult a doctor prior to the enrollment of competition.

I declare that: I am / My Child is healthy, physically fit, and suitable to participate in the above activity. School shall not be liable for any injury or death which I may suffer in this activity. If the cause of injury or death is due to my own negligence or inadequacy in health and fitness.

Signature of Parent / Guardian: _____

Name of Parent / Guardian: _____

DELIA MEMORIAL SCHOOL (BROADWAY)

Notice to Parents / Guardians

Date: 14th September, 2018

Dear Parent / Guardian,

LCSD Outreach Athletic training program.

Your child / ward has been selected for the LCSD Outreach Athletic training program. The detail as follows:

Date	Oct: 8,15,22,29 Nov: 5,12,19,26 Dec: 3,10 (Every Monday)
Time	5:30 pm - 7:30 pm
Venue	Sham Shui Po Sports Ground

Please sign the letter appended below as an agreement for your child / ward to contest in the events. The signed letter should be returned to **Mr. LI KA CHUN** on or before **29th September, 2018**.

Yours faithfully



Lo K.C.
Principal

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Parent's Agreement Letter (PN_1819_018)

Re: Athletic Team Training

Date: _____

Dear Principal,

I **agree** my child / ward _____ of S _____ (), to participate in the competitions of the **LCSD Outreach Athletic training program**.

Students should be aware of their health conditions and consider whether it is suitable for them to enroll in this competition. In case of doubt, please consult a doctor prior to the enrollment of competition.

I declare that: I am / My Child is healthy, physically fit, and suitable to participate in the above activity. School shall not be liable for any injury or death which I may suffer in this activity. If the cause of injury or death is due to my own negligence or inadequacy in health and fitness.

Signature of Parent / Guardian: _____

Name of Parent / Guardian: _____

DELIA MEMORIAL SCHOOL (BROADWAY)

Notice to Parents / Guardians

Date: 14th September, 2018

Dear Parent / Guardian,

Watson Challenge 2018

Your child / ward has been selected for the Hong Kong Watson Challenge 2018. The detail as follows:

Name of competitions	Watson Challenge 2017
Organizers	Watson Athletic Club
Date	29 September – 1 October 2018 (Friday, Saturday & Sunday)
Time	8:00 am - 5:00 pm
Venue	Wan Chai Sports Ground

Please sign the letter appended below as an agreement for your child / ward to contest in the events. The signed letter should be returned to **LI KA CHUN** on or before **20th September, 2018**.

Yours faithfully



Lo K.C.
Principal

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Parent's Agreement Letter (PN_1819_018)

Re: Watson Challenge 2017

Date: _____ September, 2017

Dear Principal,

I **agree** my child / ward _____ of S _____ (), to participate in the competitions of the **Watson Challenge 2018**.

Students should be aware of their health conditions and consider whether it is suitable for them to enroll in this competition. In case of doubt, please consult a doctor prior to the enrollment of competition.

I declare that: I am / My Child is healthy, physically fit, and suitable to participate in the above activity. School shall not be liable for any injury or death which I may suffer in this activity. If the cause of injury or death is due to my own negligence or inadequacy in health and fitness.

Signature of Parent / Guardian: _____

Name of Parent / Guardian: _____