DELIA MEMORIAL SCHOOL (BROADWAY)

Notice to Parents / Guardians

Date: 24th September 2018

Dear Parent / Guardian,

Swimming Training

Your child / ward has been selected for the Swimming Training. The detail as follows:

Date	Time	Venue
28th Sep 18 to 31st May 19 (Every Tuesday & Friday)	16:00 – 18:00	Lai Chi Kok Park Swimming Pool

Each student is asked to pay \$ 100 for the Team Uniform and equipment fee.

Please sign the letter appended below as an agreement for your child / ware. The signed letter should be returned to Mr Luk N.S. on or before 26th September			
	Yours faithfully		
	K.C. Lo		
	Principal		
	××		
Re: Swimming Training Date:			
Dear Principal,			
I <u>agree</u> my child / ward of S (competitions of the <u>Swimming Training</u> . I return herewith <u>\$ 100</u> for <u>equipment</u> fee.			
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 activity. School shall not be liable for any injury or death which I may sut cause of injury or death is due to my own negligence or inadequacy in health	fer in this activity. If the		
Signature of Parent / Guardian:	•		
Name of Parent / Guardian:			

DELIA MEMORIAL SCHOOL (BROADWAY)

Notice to Parents / Guardians

Date: 24th September 2018

Dear Parent / Guardian,

Interschool Swimming Competition

Your child / ward has been selected for the Interschool Swimming Competition. The detail as follows:

Date	Time	Venue
26 th Sep 18 (Wednesday) 5 th Oct 18 (Friday)	08:00 - 17:00	Kowloon Park Swimming Pool

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 Luk Ngai Shing on or before 26th April 2018

Yours faithfully Principal Parent's Agreement Letter (PN 1819 037) Re: Interschool Swimming Competition Date: Dear Principal, of S ____(), to participate in the I agree my child / ward _____ competitions of the Interschool Swimming Competition. 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: