

**DELIA MEMORIAL SCHOOL (BROADWAY)**Notice to Parents / GuardiansDate: 12<sup>th</sup> November, 2018

Dear Parent / Guardian,

**DSE P.E. Fitness and Skill Assessment**


Please be informed that DSE P.E. First Term Fitness and Skill Assessment will be held on 26<sup>th</sup> and 28<sup>th</sup> November. Details as follows:

Assessment	Date	Time	Venue
Track and Field	26 <sup>th</sup> Nov 2018 (Monday)	5:30pm – 7:30pm	Sham Shui Po Sports Ground
Fitness	28 <sup>th</sup> Nov 2018 (Wednesday)	3:00pm - 5:00pm	Tsing Yi Sports Ground

Please note that your child / ward should be present for all assessments. Due to the tight schedule, neither supplementary test arrangement nor estimated assessment marks will be given to students who are absent on these days. No time compensation will be given to students who are late for their tests.

Please sign the reply slip below and instruct your child / ward to have it returned to **Mr. Wong CM** on or before **16<sup>th</sup> November, 2018**. Thank you for your attention.

Yours faithfully

  
K.C. Lo  
Principal

**Reply Slip (PN\_1819\_091)**Re: DSE P.E. Fitness and Skill Assessment

Date: \_\_\_\_\_ November, 2018

Dear Principal,

I **will** instruct my child / ward \_\_\_\_\_ of \_\_\_\_\_ ( ) to attend the **DSE P.E. Fitness and Skill Assessment**.

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

I declare that: My Child is healthy, physically fit, and suitable to participate in the above assessment. School shall not be liable for any injury or death which my child may suffer in this assessment.

Signature of Parent / Guardian : \_\_\_\_\_

Name of Parent / Guardian : \_\_\_\_\_