

**DELIA MEMORIAL SCHOOL (BROADWAY)**Notice to parents / guardians

Date: 10/09/2021

Dear Parents / Guardians,

**Volleyball Team Invitation**

Your child / ward has been selected for the Volleyball Team. We will resume our training after social distancing restrictions have been lifted. Training details are as follows:

Date	Time	Venue
Every Monday	14:00 – 17:00 (Half day arrangement) 16:00 – 19:00 (Full day arrangement)	School Gymnasium
Every Wednesday (To Be Confirmed)	14:00 – 17:00 (Half day arrangement) 16:00 – 19:00 (Full day arrangement)	Cheung Sha Wan Playground

Each student is asked to pay **\$ 100.00** for the **Team Uniform** fee.

Please return the fee and reply slip to Mr. Wong CM on or before Friday, 15<sup>th</sup> September 2021.  
Please remind your child / ward to attend the activity punctually and beware of safety.

Thank you for your kind attention.

Yours faithfully,



K.C. Lo  
Principal

.....✂.....  
**Reply Slip (PN\_2122\_020)**

**Re: Volleyball Team Invitation**

Date: \_\_\_\_\_

Dear Mr. Lo,

I **agree** my child / ward \_\_\_\_\_ of S \_\_\_\_\_ ( ), to participate in the Volleyball Training. I return herewith **\$ 100.00** for the **Team Uniform** fee.

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

I declare that: My Child is healthy, physically fit, and suitable to participate in the above activity.

\*\* ☐ My Child had received 2 doses of COVID-19 vaccine for more than 14 days.

My family is recipient of ☐ CSSA, ☐ the STAS full-grant or ☐ the STAS half-grant.

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

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

Please "✓" the appropriate box.