DELIA MEMORIAL SCHOOL (BROADWAY)

Notice to parents / guardians

2nd December 2021

Dear Parents / Guardians,

Boys Volleyball Training

Your child / ward has been selected for the Boys Volleyball Team.

Training details are as follows:

| Date: | Time: | Venue: |
|-------------------|---------------|---------------------------------|
| Assigned Saturday | 9:00 – 12:00 | School Gymnasium |
| Every Wednesday | 15:30 - 18:30 | Cheung Sha Wan Volleyball Court |

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 10th December 2021 (Friday). Please remind your child / ward to attend the activity punctually and beware of safety.

| Thank you for your kind attention. | |
|---|--------------------------------|
| | Yours faithfully, |
| | Lodalh |
| | K.C. Lo |
| | Principal |
| Reply Slip (PN_2122_105) | |
| Re: Boys Volleyball Training | _ |
| | Date: |
| Dear Mr. Lo, | |
| I <u>agree</u> my child / ward of S | S(), to participate in |
| the Boys Volleyball Training. I return herewith \$\sum 100.00\$ for the Team | |
| | |
| Students should be aware of their health conditions and consider venroll in this activity. In case of doubt, please consult a doctor prior to | |
| I declare that: My Child is healthy, physically fit, and suitable to part | icipate in the above activity. |
| | |
| Signature of Parent / Guardia | n· |
| Signature of Parent / Guardia | n: |

Name of Parent / Guardian: