## DELIA MEMORIAL SCHOOL (BROADWAY)

Notice to Parents / Guardians

5<sup>th</sup> July, 2023

Dear Parent / Guardian,

## **Summer Swimming Training**

Your child/ward has been selected for the Summer Swimming Training. Training details as follows:

Date	Time	Venue
17 <sup>th</sup> July – 30 <sup>th</sup> August 2023	10:00-12:00	Li Cheng Uk Swimming Pool
(Every Mon, Wed and Fri)		
Each student is asked to pay §		- ·
		and submit the fee for your child/ward to contest Luk NS on or before 12 <sup>th</sup> July, 2023.
		Yours faithfully,
		Loxach
		K.C. Lo
		Principal
×		××
	Reply Slip (PN_22	223_291)
		Date:
Re: Summer Swimming Training		
Dear Principal,		
I agree my child / ward (name)		_ (class/class no.), to participate in the
Swimming Summer Training. I r		
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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: 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:	