

DELIA MEMORIAL SCHOOL (BROADWAY)Notice to Parents/Guardians10th July, 2023

Dear Parents / Guardians,

Summer Activities – Group 1

In summer vacation, social workers organized a serial of activities in order to provide support for students to enhance their social skills, support network in school and enrich their school life. Your child/ward will take part in the summer activity. The details are as following:

	Coffee Latte Art Workshop	Trampoline Experiential Activity
Date	13/7 & 20/7/2023 (Thursday)	1/8/2023 (Tuesday)
Time	9:30am-12:30pm	11:00am-4:00pm
Gathering Time/ Place	9:30am / School Entrance	11:00am / School Entrance
Dismissal Time/ Place	12:30pm / School Entrance	4:00pm / School Entrance
Venues	Unit 23, 9/F Corporation Park, 11 On Lai Street, Shek Mun, Sha Tin, NT	3/F, Kodak House 1, 321 Java Road, Quarry Bay, Hong Kong
Remark	1. Casual wear is suggested in the Coffee Latte Art activity. 2. Transportation and lunch will be arranged in the Coffee Latte Art activity. 3. Students are suggested to attend all the sessions for better learning process.	1. Casual Sportswear is suggested in the Trampoline activity. 2. Please bring at least 1L water in the Trampoline activity. 3. Transportation and lunch will be arranged in the Trampoline activity.

Please sign the reply slip through e-class system on or **before 12th July, 2023 (Wednesday)**. Please remind your child / ward to attend the activity punctually.

For the Trampoline Experiential Activity, 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 the activity.

Thank you for your kind attention.

Yours faithfully,



K. C. Lo

Principal

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Reply Slip (PN_2223_299)

Re: Summer Activities – Group 1

Date: _____

Dear Mr. Lo,

I agree / do not agree* my child/ward _____ (____) of S_____ class to take part in the summer activities (Coffee Latte Art Workshop and Trampoline Activity). I declare that My Child is healthy, physically fit and suitable to participate in this activity.

Signature: _____

Name of Parent / Guardian: _____

* Please delete where inappropriate