

## DELIA MEMORIAL SCHOOL (BROADWAY)

Notice to Parents / Guardians10<sup>th</sup> December, 2025

Dear Parents / Guardians,

**Student Helpers in Joint School Singing Contest**

As your child/ward is selected as a helper of the Joint School Singing Contest "Once Upon a Delia" on **13<sup>th</sup> December 2025**, he/she is requested to be on duty from 8:15 a.m. to 1:00 p.m. on that day. Details are as follows:

<b>Date:</b>	13 <sup>th</sup> December, 2025 (Saturday)
<b>Organizer:</b>	Delia Group of Schools Joint School Students' Welfare Association
<b>Venue:</b>	Delia Memorial School (Hip Wo) Hall
<b>Gathering Place / Time:</b>	Delia Memorial School (Hip Wo) / 8:15 a.m.
<b>Dismissal Place / Time:</b>	Delia Memorial School (Hip Wo) / 13:00 p.m.
<b>Remarks:</b>	<b>Student helpers should wear a tidy school winter uniform and bring their Student ID card</b>

Please return the reply slip through the e-class system on or before **12<sup>th</sup> December, 2025**. 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\_2526\_131)**

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

**Re: Student Helpers in Joint School Singing Contest**

Dear Principal,

Thank you for the selection of my child / ward to serve school. I will remind my child / ward \_\_\_\_\_ of S \_\_\_\_\_ (      ) to take part in the activity punctually and beware of safety.

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

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

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