

DELIA MEMORIAL SCHOOL (BROADWAY)  
**Notice to Parents / Guardians**

Date: 15th December, 2025

Dear Parent / Guardian,

**Volleyball Team Christmas Holiday Training**

Your child/ward has been invited to join Volleyball Training during the Christmas holiday.  
 The details are as follows:

<b>Team</b>	<b>Date</b>	<b>Time</b>	<b>Venue</b>
Girls	23/12 Tuesday (12noon to 4:00 pm) 30/12 Tuesday 03/01 Saturday	9:00 am – 12:00noon	School Gymnasium
Boys	23/12 Tuesday (12noon to 4:00 pm) 30/12 Tuesday 03/01 Saturday	1:00 pm – 4:00 pm	School Gymnasium

\*Students need to wear **the school P.E. uniforms or Team Jersey** to attend this activity.

Please sign the reply slip through eclass apps as an agreement for your child/ward to contest in the events. The signed letter should be returned on or before **20<sup>th</sup> December, 2025**.

Thank you for your kind attention.

Yours faithfully



K. C. Lo  
Principal

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**Reply Slip (PN\_2526\_137)**

**Re: Volleyball Team Christmas Holiday Training**

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

Dear Principal,

☐ I **agree**\* my child / ward to participate in the **Volleyball Team Christmas Holiday Training**.

**I declare that: I am /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 : \_\_\_\_\_