



Li Cheng Uk Government Primary School

43 Tonkin Street, Sham Shui Po, Kowloon

Tel : 2386 8049

Website : <https://lcu.edu.hk>

Fax : 2708 9950

Email : lcugps@edb.gov.hk

Special Notice: 1/2024-25

2.9.2024

To Parent/Guardian,

Government Schools Martial Arts Performance (Rehearsal session)

Your child/ ward was selected to perform "Government Schools Martial Arts Performance". The information of rehearsal sessions are as follows:

		Dismissal
Date & Time	3/9 (Tue), 5/9 (Thur)	2:00 – 5:00 pm
	12/9 (Thur), 19/9 (Thur)	2:00 – 4:00 pm
Venue	Tseung Kwan O Government Primary School	
Remarks:	1. Students should prepare your own lunch . 2. Students should wear proper LCU summer P.E. uniform . 3. Transportation to the designated venue would be provided by LCU.	
		5:30 pm
		4:30 pm
		LCU

Please indicate your wish in the reply slip and return it to Ms KWOK Wing-yiu on or before 3.9.2024. For any enquiries, please contact Ms KWOK Wing-yiu at 2386 8049.

Thank you for your attention.

(Ms CHUI Sau-man)
Headmistress

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Reply Slip
Government Schools Martial Arts Performance (Rehearsal session)

Special Notice: 1/2024-25

Date: _____

To: Headmistress,

I have read the Special Notice No. 1/2024-25 dated 2.9.2024 and I fully understand its content.

* My child / ward is in good health and he / she will join the said activity.

My child / ward will not join the said activity.

<p>* Normal Way of going home:</p> <p><input type="checkbox"/> Go Home Alone</p> <p><input type="checkbox"/> Parent's Team</p> <p><input type="checkbox"/> School bus No. ()</p>	<p>* Way of going home after the activity:</p> <p><input type="checkbox"/> Go Home Alone.</p> <p><input type="checkbox"/> Go home with his / her siblings. (Name: _____ Class: P. _____) (Name: _____ Class: P. _____) (Name: _____ Class: P. _____)</p> <p><input type="checkbox"/> Pick up by parent / guardian at LCUGPS. Name: _____ Relationship: _____ Contact Phone Number: _____</p>
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***Remark: * Please tick the appropriate box**

Student's name: _____ Class: P. _____ ()

Parent's/Guardian's signature: _____ Contact no.: _____