



Li Cheng Uk Government Primary School

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Special Notice: 2/2024-25

2.9.2024

To: Parents / Guardians of students concerned,

School Sports Programme – iSmart Fitness Scheme

The Leisure and Cultural Service Department (LCSD) and our school is going to launch the iSmart Fitness Scheme this year. The Scheme is hosted by the LCSD and co-organised by the EDB and the Physical Fitness Association of Hong Kong, China, with support from the Department of Health. This scheme aims to provide more opportunities for students to participate in sports, encouraging their regular participation in Sports, fostering a healthy lifestyle, as well as enhancing parents' awareness of children's health. Your child / ward is nominated as a participant. The details of the Scheme are as follows:

Venue:	School
Date:	End of September 2024 to May 2025 (Thursday) *Schedule will be announced in late September.
Time:	3:00 – 5:00pm
Targets:	Students of P.3-6 who are exercise-deficient or overweight/underweight.
Activities:	Physical fitness pre-test and post-test, physical fitness, fitness walking, rope-skipping, squash and rugby. *Students need to wear the smart sports bracelets and upload their results.
Awards:	<ul style="list-style-type: none"> ✓ Students who complete the pre-test and post-test and have an attendance rate of 80% in sports training will be awarded a certificate of attendance ✓ An incentive souvenir will be presented to students with improvement in the post-test as compared to the pre-test. ✓ Upon completion of the whole Scheme, based on the record of the smart sports bracelets uploaded by participating students as at 5 June 2025, those top 5 students reaching 8,000 steps daily on average and with the most training hours of moderate to vigorous physical activity will obtain Award of Outstanding Performance.
Remarks:	<ul style="list-style-type: none"> ◇ Students should wear PE uniform. ◇ No school bus service will be provided.

All participating students and their parents should attend the Parents and Students' Seminar. The details are as follows:

Date:	12 October 2024 (Saturday)
Time:	2:00-5:30pm
Venue:	Kowloon Park Sports Centre (22 Austin Road, Tsim Sha Tsui, Kowloon)
Content:	Health talk, sports demonstration, game booth and etc.
Remarks:	<ul style="list-style-type: none"> ◇ Participates should wear sportswear. ◇ Tickets will be distributed later.

Please complete the reply slip and return it to Ms KWOK Wing-yiu on or before 9.9.2024 (Monday). Should you have any enquiries, please feel free to contact Ms Kwok at 2386 8049.

Thank you for your attention.

(Ms Chui Sau-man)

Headmistress

Reply Slip

School Sports Programme – iSmart Fitness Scheme

Special Notice: 2/2024-25

Date: _____

To: Headmistress,

I have read the School Notice No.2/2024-25 dated 2.9.2024 and I fully understand its content.

- 1) * My child/ ward and I authorize the school to use the smart sports bracelet to collect the regular exercise data of the participants, and the participants do not suffer from any diseases that make them unsuitable to participate in the above activities, and clearly understand and understand the content of the scheme.

<p>* <u>Normal Way of going home:</u></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>* <u>Way of going home after the activity:</u></p> <p><input type="checkbox"/> Go Home Alone.</p> <p><input type="checkbox"/> Go home with his / her siblings.</p> <p>(Name: _____ Class: P. _____)</p> <p>(Name: _____ Class: P. _____)</p> <p>(Name: _____ Class: P. _____)</p> <p><input type="checkbox"/> Pick up by parent / guardian at LCUGPS.</p> <p>Name: _____</p> <p>Relationship: _____</p> <p>Contact Phone Number: _____</p>
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- My child / ward **will not** join the said activity.

- 2) * My child / ward and I are in good health and we will join the Parents and Students' Seminar on 12/10 (Sat).

- My child / ward and I **will not** join the Parents and Students' Seminar on 12/10 (Sat).

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

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

Remark * Please delete the inappropriate option