



Li Cheng Uk Government Primary School

43 Tonkin Street, Sham Shui Po, Kowloon

Tel : 2386 8049

Fax : 2708 9950

Website: <http://www.lcu.edu.hk>

Email : lcugps@edb.gov.hk

Special Notice: 20/2024-25

11.9.2024

To: Parents/Guardians of students concerned,

Rope Skipping Training of 1st Term

Your child / ward has been selected to join the Rope Skipping Group. Training sessions will be arranged for the members and details are as follows:

| | | | | | | | |
|------------------|---|----------|------|-------|-------|-------|--|
| Date And Time | Tuesday 3:00 p.m. to 4:00 p.m. | Sept | 24/9 | | | | |
| | | Oct | 8/10 | 15/10 | 22/10 | 29/10 | |
| | | Nov | 5/11 | 26/11 | | | |
| | | Dec | 3/12 | 10/12 | 17/12 | | |
| | | Jan 2025 | 7/1 | 14/1 | 21/1 | | |
| Venue | School Playground / Hall | | | | | | |
| Remarks | Please wear PE uniform for the training | | | | | | |

For enquiry, please contact Ms KWOK Wing-yiu at 2386 8049. Thank you for your attention.

(Ms CHUI Sau-man)
Headmistress

Reply Slip

Rope Skipping Training of 1st Term

Special Notice : 20/2024-25

Date : _____

To: Headmistress,

I have read the Special Notice No.20/2024-25 dated 11.9.2024 and I fully understand its content.

- * My child / ward is in good health and would like to join the said activity.
 My child / ward is not available to join the said activity.

Normal Way of going home:

- * Parents' Team
 School Bus Team (School Bus No. _____)
 Go home alone
 Go home with brother(s)/ sister(s) (Name: _____ P. _____)
(Name: _____ P. _____)

Way of going home after training:

- * Pick up by parents
 Go home alone
 Go home with brother(s)/ sister(s) (Name: _____ P. _____)
(Name: _____ P. _____)

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

Parent's/Guardian's Signature : _____

Contact telephone number: _____

Remarks: * Please ✓ in the appropriate boxes.