



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: 21/2024-25

11.9.2024

To: Parents/Guardians of students concerned,

Basketball Team Training of 1st Term

Our school basketball team will be joining the Kowloon West Inter-Primary Schools Basketball Competition 2024-25, which will take place in February and March 2025. Your child has been selected to join the basketball team. In order to have better preparation for the competition, several training sessions will be arranged for the team members and details are as follows:

| | | | | | |
|---------------|--|------|-------|-------|------|
| Month | September to January 2025 | | | | |
| Date and Time | Friday: 3:00 p.m. to 4:30 p.m. | 27/9 | | | |
| | | 4/10 | 18/10 | 25/10 | |
| | | 1/11 | 22/11 | 29/11 | |
| | | 3/1 | 10/1 | 17/1 | 24/1 |
| Venue | School Playground & Shun Ning Road Recreation Ground | | | | |
| Remarks | Please wear PE uniform for the training | | | | |

The details of the competition will be announced later. For enquiry, please contact Ms KWOK Wing-yiu at 2386 8049. Thank you for your attention.

(Ms CHUI Sau-man)
Headmistress

Reply Slip

Special Notice : 21/2024-25

Basketball Team Training of 1st Term

Date : _____

To: Headmistress,

I have read the Special Notice No.21/2024-25 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: |
| * <input type="checkbox"/> Parents' Team <input type="checkbox"/> School Bus Team (School Bus No. _____) <input type="checkbox"/> Go home alone <input type="checkbox"/> Go home with brother(s)/ sister(s) (Name: _____ P. _____) (Name: _____ P. _____) |
| Way of going home after training: |
| * <input type="checkbox"/> Pick up by parents <input type="checkbox"/> Go home alone <input type="checkbox"/> 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.