

Li Cheng Uk Government Primary School

43 Tonkin Street, Sham Shui Po, Kowloon

Tel: 2386 8049

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

Fax: 2708 9950 Email: lcugps@edb.gov.hk

Special Notice: 111/2024-25

16.1.2025

All HK Inter-Area Primary Schools Athletics Competition 2024-25

To: Parents / Guardians,

Your child has been selected by the HK Schools Sports Federation Kowloon West Primary Schools Area Committee to join the All Hong Kong Inter-Area Primary Schools Athletics Competition 2024-25. The details are as follows:

Date	28-2-2025 (Friday)		
Time	9:00 a.m. to 5:00 p.m.		
Venue	Tseung Kwan O Sports Ground		
Uniform	PE Uniform		
Transportation	Provided by S.K.H. Kei Fook Primary School		
Place and Time of Assembly	of Assembly 7:40 a.m. at Cheung Sha Wan MTR station Exit B		
Place and Time of Dismissal	and Time of Dismissal 6:00 p.m. at school (normal dismissal)		
Lunch	Self-packed lunch		

Students will be accompanied by the P.E. Teacher and the necessary precaution will be taken for their safety.

Participants will come back to school and dismiss at around 6:00p.m.

Please indicate whether you will allow your child/ward to participate in the competition and declare any known medical condition from which your child/ward may be suffering. Please return the reply slip to Mr Mui on or before 17.1.2025 (Friday).

(Ms CHUI Sau-man)

Headmistress

Reply Slip

All HK Inter-Area Primary Schools Athletic Competition 2024-2025

			Special Notice: <u>111/202</u>			
			Date:			
To:	: Headmistress,					
	I have read the Special Notice No.111/2024-25 dated 16.1.2025 and I fully understand its content.					
* 🗆	f ☐ 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 activi	ity.				
Norn	nal 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 activity at around 6:00p.m. at LCU	J				
* 🗆	Pick up by parents					
	Go home alone					
	Go home with brother(s)/ sister(s) (Name:	P)			
	(Name:	P)			
Stude	nt's name:	()	Class P.		
			J			
	t's/Guardian's Signature:					
imerg	gency telephone number:					

Remarks: * Please \checkmark the appropriate box.