



Li Cheng Uk Government Primary School

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Parent-Teacher Association

Notice No: 21/2024-25

18.3.2025

Dear Parents/Guardians,

Fitness Class on Stretching/Aerobic and Yoga

Parents of children at primary level play a significant role in providing guidance for and facilitating children's social and emotional development. Their well-being is vital to healthy parent-child and marital relationships, as well as a harmonious and balanced family system. In order to promote and develop parents' physical and psychological well-being, our PTA will co-organise the Fitness Class on Stretching/Aerobic and Yoga with United Christian Nethersole Community Health Service. Details are as follows:

Date:	7/4, 14/4, 28/4, 12/5, 19/5, 26/5, 2/6, 9/6, 16/6, 23/6 (Monday)
Time:	2:00 p.m. – 3:30 p.m.
Venue:	School Hall
Remarks:	<ol style="list-style-type: none"> In case of adverse weather condition and announcement of school suspension by the EDB, the activity will be postponed and participants will be informed of the rescheduled date in due course. Maximum number of participants: 25 (If the number of applicants exceed 25, the PTA will draw lots to confirm the successful applicants.) No walk-in participants will be accepted. Confirmation note will be issued to successful applicants on or before 26.3.2025 (Wednesday).

Please return the reply slip in the e-notice on or before **21.3.2025 (Friday)**. Should you have any enquiries, please feel free to contact Ms LEE Kwong-yung (Deputy Headmistress) at 2386 8049.

Thank you for your attention.

(Ms CHUI Sau-man)
Headmistress

Reply Slip

Fitness Class on Stretching/Aerobic and Yoga

PTA Notice: 21/2024-25

Date: _____

To: PTA Chairperson and Headmistress,

I have read the PTA Notice No. 21/2024-25 dated 18.3.2025 and fully understand its content.

I **will** participate in the Fitness Class on Stretching/ Aerobic and Yoga.

I **will not** participate in the Fitness Class on Stretching/ Aerobic and Yoga.

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

Parent's/Guardian's Signature: _____ Contact telephone number: _____

* Please put a '√' in the appropriate box.