

Li Cheng Uk Government Primary School

43 Tonkin Street, Sham Shui Po, Kowloon

Tel: 2386 8049

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Special Notice: 134/2024-25

11.03.2025

To Parent/Guardian,

Community Youth Club (Hiking for Charity)

To raise students' awareness of environmental protection as well as to raise funds for The Community Chest, a hiking activity will be organized on 12-4-2025. Participants will also build up good values such as perseverance, love and care, as well as showing respect to the nature. Parents are requested to supervise and support the child to complete the donation form. All funds raised through "Greening for the Chest" will be designated to support "Children and Youth services" by The Community Chest. Schools would bank in all cash and/or crossed cheques payable to "The Community Chest of Hong Kong" after the activity.

Your child/ward is selected to join the said activity. The information is as follows:

Date: 12-4-2025 (Saturday)

Time: 9:00 am to 12:30 pm

Venue: Lions Nature Education Centre Sai Kung

Uniform: P.E. uniform

Transportation will be provided by school to and from Lions Nature Education Centre Sai Kung

Responsible teacher: Ms WONG Yuen Kwan

Please take note of the followings:

- 1. Students will meet Ms WONG Yuen Kwan at LCU lobby at 9:00am.
- 2. Students should wear P.E uniform during hiking.
- 3. Students should bring enough water.
- 4. Students should have breakfast in the morning before assembly.
- 5. Students may bring \$30 to buy some snacks and eat in the cafe after hiking.

Please indicate your wish in the reply slip and return it to Ms **WONG Yuen Kwan** on or before 18.3.2025. For any enquiries, please contact **Ms WONG Yuen-kwan** at 2386 8049. Thank you for your attention.

(Ms CHUI Sau-man) Headmistress

Reply Slip CYC (Hiking for Charity)

	Special Notice:	134/2024-25
TT 1	Date:	
e: Headmistress,		
I have read the Special Notice No. 134/ 2024-25 dated $11.03.2025$ and I	fully understand its	content.
 ☐ I wish my child to join the activity. ☐ I do not wish my child to o join the activity. 	**	
* Way of going home after the activity:		
Go Home Alone		
Pick up by parent / guardian at LCUGPS		
Name:		
Relationship:		
Contact Phone Number:		
Student's name: ()	Class: P.	
Parent's/Guardian's Signature:		
Parent's/Guardian's contact Number:		

*Remark: * Please tick the appropriate box