

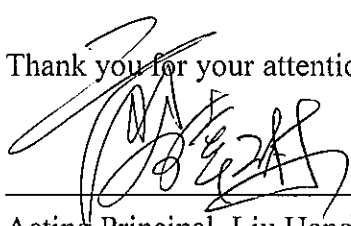
Chi Yun School**2024 - 2025 School Year****Extra-curricular Activities for Students Circular Notice**4th October, 2024

Dear Parents,

Our school will be holding the "Box of Hope" event. The "Box of Hope" is an annual charity project aimed at providing practical and educational gifts to underprivileged children in Hong Kong and Asia. We sincerely invite parents to participate in the donation activity (details as below). The school will arrange for the donated items to be sent to the collection point and then distributed to various organizations to be given to children in need. On the day of the event, there will also be a demonstration performance of the "Care and Inclusive Dance Program." The event details are as follows:

1. Activity Coordinators : Ms. Cheng Kwan Kwan & Mr. Yip Chun Wa
2. Activity Title : 2024-2025 "Box of Hope"
3. Organizer : "Box of Hope"
4. Date : 6th November, 2024 (Wed)
5. Time : 9:10 a.m. – 11:15 a.m.
6. Place : CHI YUN SCHOOL
HALL & classroom
7. Fee : Free of charge
8. Clothing : School uniform
9. Application Deadline : Please complete the **reply slip** and submit it to the school on or before **18th October, 2024 (Fri)**
(Please be reminded that late application will not be entertained.)
10. Contact : For any queries, you are welcome to contact our activity coordinators or our class teachers.
Phone No. : 23862010 / 23862064 ; Fax No. : 27089853
11. Remark : *Suggested Donation Items: * Toys, stationery, books, hygiene products.
*Items Not Recommended for Donation: * Clothing, food, fragile items, toy guns, liquids.
Parents who wish to donate items can bring them back to the school on the day of the event, or submit them to the school office in person or by mail before **1st November, 2024.**

Thank you for your attention.


Acting Principal, Liu Hang Lam

Chi Yun School

Reply Slip

Date: _____

I * agree / disagree (Please put a "✓" in the appropriate box) my child _____
(Class: _____) to participate in the activity 2024-2025 "Box of Hope" held on 6th
November, 2024 (Wed).

In case my child has any health problems, I agree with the immediate action taken by the
school or the organizer.

Parents * will / will not (Please put a "✓" in the appropriate box) accompany
their child in this activity.

No. of participants : _____ (Note : students not included)

Parent's Name : _____

Parent's Signature : _____