

**Chi Yun School****2024 – 2025 Extra-curricular Activities for Students of Group B**14<sup>th</sup> March, 2025

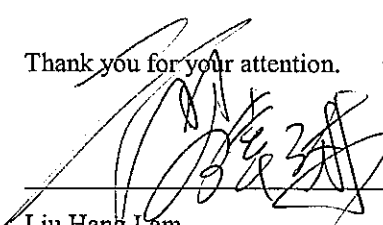
To Parents:

Our school will arrange a joint class activity, details are as follows:

- |                                 |   |
|---------------------------------|---|
| 1. Activity Coordinators :      | <u>Mr. Li Sheung Him, Mr. Leung Hoi Chun and Ms. Tsang Yin Ting</u>   |
| 2. Activity Title :             | <u>Group B Joint Class Activity – Visit “Go Park”</u>   |
| 3. Organizer :                  | <u>Chi Yun School</u>   |
| 4. Date :                       | <u>3<sup>rd</sup> April, 2025 (Thu)</u>   |
| 5. Time :                       | <u>9:10am – 3:30 pm</u>   |
| 6. Place :                      | <u>Go Park (9 Hoi Ying Road, Sai Sha, New Territories)</u>  |
| 7. Lunch Arrangement :          | <u>Lunch or picnic at Go Park. Students with PEG feeding will be arranged by parents, corresponding maids or school health workers. Lunch fee for each student is \$60 (if parents attend, can buy/bring their own food at their own expense)</u> |
| 8. Transportation Arrangement : | <u>School buses / coaches: Parents please arrive at school before 9:20 am, activity dismisses around 2:00 pm.</u>   |
| 9. Transportation Fee :         | <u>\$ 75 per person (For one student with two parents or guardians accompanied will be free of charge)</u>  |
| 10. Dressing Code :             | <u>School uniforms and jackets</u>  |
| 11. Pick-up time :              | <u>As usual</u>   |
| 12. Deadline for Application :  | <u>24<sup>th</sup> March, 2025 (Mon) (Late applications are not accepted)</u>   |
| 13. Contact method :            | <u>School Tel. No. : 23862010 / 23862064, Fax No. : 27089853</u>  |

- Remarks :
1. For those who doesn't join the activity, they are allowed to come to school and will be taken care of by school staff in groups.
  2. If the activity is cancelled due to bad weather, the transportation fee will not be refunded.
  3. If the actual meal cost is less than \$60, the remaining balance will be refunded; if the amount exceeds \$ 60, the remaining balance will need to be paid.

Thank you for your attention.

  
Liu Hang Lam,

Acting Principal, Chi Yun School



### Reply Slip

Date: \_\_\_\_\_

Dear Sir/ Madam,

Notice of "Group B Joint Class Activity – Visit "Go Park"" well received.

I \_\_\_\_\_ (parent's name) am \_\_\_\_\_'s (student's name)

( Class: \_\_\_\_\_ ) parent or guardian.

- My child will join the activity.
- My child will not join the activity, but he/she will still go to school that day.
- My child will apply for a leave that day and will not go to school.

If there are any health problems or other emergency with my child in case, I agree with the immediate action taken by the school or the organizers.

Parents \* will  / will not  accompany their child to this activity.

No. of parents: \_\_\_\_\_

Registration and fees:

	Transportation Fee	Lunch Fee	Total
Student	<input type="checkbox"/> \$ 75 (Can apply for after-school learning support program to waive fares)	<input type="checkbox"/> \$ 60 <input type="checkbox"/> buy/bring their own food by parents	\$ _____
Parents	<input type="checkbox"/> \$ 75 x _____ person (Free of charge for two adults or guardians)	<input type="checkbox"/> \$ 60 <input type="checkbox"/> buy/bring their own food by parents	\$ _____
	\$ _____	\$ _____	Total: \$ _____

\* I need  / do not need  ( please indicate by ticking the appropriate box  ) to apply School-based After-school Learning and Support Programmes to waive the lunch fee and transportation fee for my child

Remark : Please put a "✓" in the appropriate box, can be more than one ✓.

Parent's Name : \_\_\_\_\_

Parent's Signature : \_\_\_\_\_