

陳瑞祺(喇沙)書院
九龍何文田常和街4號
電話：二七一一八一七五



CHAN SUI KI (LA SALLE) COLLEGE
4 SHEUNG WO STREET, HOMANTIN,
KOWLOON, HONG KONG.
TEL: 27118175

Date: 24 September 2010

Circular No. 029

Dear Parents/ Guardians,

Re: Participation in Caritas Bazaar (明愛賣物會)

Your son/ward _____ of Form _____ has been selected to participate in the captioned activity. Details of the activity are as follows:

Date: 21 November 2010 (Sunday)

Time: 8:45 am – 12:15 am / 12:00 noon – 3:30 pm / 3:15 pm – 6:45 pm / whole day

Venue: Shatin Yuen Wo Playground

Teachers-in-charge : Mr WK Wong, Mr CK Wong, Mr KV Vong & Mr KK Young

Emergency Contact Telephone No. (活動當天之緊急聯絡電話) : 65048622

Please indicate your wish whether you will allow your son/ward to take part in the above functions and declare any known medical condition from which your son/ward may be suffering.

Yours faithfully,

Lee Ting Leung
Principal



Reply Slip (Circular No. 029)

Name of Activity: Caritas Bazaar (明愛賣物會)

I agree/do not agree* my son/ward* _____ of Class _____ taking part in the captioned activity.

Parent's/ Guardian's Signature: _____

Parent's/ Guardian's Name: _____

Date: _____