



# Li Cheng Uk Government Primary School

43 Tonkin Street, Sham Shui Po, Kowloon

Tel : 2386 8049

Website : <http://www.lcu.edu.hk>

Fax : 2708 9950

Email : [lcugps@edb.gov.hk](mailto:lcugps@edb.gov.hk)

## Special Notice : 74/2022-23

10.01.2023

To: Parents/Guardians,

### Extra Training Sessions for Hong Kong Drama Festival 2022/23

Please be informed that your child/ward has been selected to perform in Hong Kong Drama Festival 2022/23. Your child is required to attend the following extra training sessions:

Date	Time	Venue
Monday - 16/1 , 6/2 , 13/2 Tuesday - 14/2 Wednesday - 1/2 , 8/2 Friday - 3/2 , 10/2	3:30p.m. - 4:30p.m.	LCU (Room 17)

The purpose of the sessions is to prepare pupils to take part in Hong Kong School Drama Festival 2022/23.

There will be **no school bus service provided after the training**. Please make proper arrangement for your child/ward and indicate his/her way of going home in the reply slip.

Please kindly fill in the attached reply slip and return it to Ms Pong on or before 12<sup>th</sup> January 23 (Thursday).

Thank you for your attention.

(Ms CHUI Sau-man)  
Headmistress

### Reply Slip

### Extra Training Sessions for Hong Kong Drama Festival 2022/23

Special Notice: 74/2022-23

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

To: Headmistress,

I have read the Special Notice No. 74/2022-23 dated 10.01.2023 and I fully understand its content.

I **notice and agree** my child/ward \_\_\_\_\_ of Class P. \_\_\_\_\_ to join the extra Drama Training.

<p># <u>Normal Way of going home:</u></p> <p><input type="checkbox"/> Go Home Alone</p> <p><input type="checkbox"/> Parent's Team</p> <p><input type="checkbox"/> School bus No. ( )</p>	<p># <u>Way of going home after activity:</u></p> <p><input type="checkbox"/> Go Home Alone.</p> <p><input type="checkbox"/> Join the activity and go home with his / her siblings. (Name: _____ Class: P. _____). (Name: _____ Class: P. _____). (Name: _____ Class: P. _____).</p> <p><input type="checkbox"/> Pick up by parent / guardian at LCUGPS. Name: _____ Relationship: _____ Contact Phone Number: _____</p>
--	--

Pupil's name: \_\_\_\_\_ ( ) Class : P. \_\_\_\_\_

Parent's/Guardian's Signature: \_\_\_\_\_

Remark: #Please tick the appropriate boxes.