



**靈糧堂怡文中學**  
**Ling Liang Church E Wun Secondary School**  
電話：2109 4000 傳真：2109 4066

**Circular 2020/2021 No.051**

18<sup>th</sup> November, 2020

Dear Parents/ Guardians,

**Hip Hop Dance Club**

To enhance students' badminton skills, our school has a tutor to provide the training. We hope parents can support children to join the course. The details of the course are as follows:

- No. of sessions: 17  
Date of activity: 30/11, 7/12, 14/12, 21/12, 25/1, 1/2, 8/2, 22/2, 8/3, 15/3, 22/3, 19/4, 26/4, 3/5, 10/5, 17/5, 24/5 (Every Monday)  
Lunch time: 1:00 pm - 2:00 pm  
Venue of Lunch: School room G01  
Lunch arrangement: To prevent the spread of the coronavirus, students should stay at school for lunch. (They can bring their own lunch boxes or pre-order their lunches at the school tuck shop.)  
Time of activity: 2:00 pm - 3:30 pm  
Venue of activity: School room G01  
Staff-in-charge: Mr. Cheong Ka Ho, the Activity Assistant  
Co-organizer: Boogle Dance Studio  
Fee: \$200  
Remarks:  
1. When Tropical Cyclone Warning signal No.8 or above is hoisted, or a Red or Black Rainstorm Warning is issued or the suspension of school is announced by the Education Bureau from 5:30 a.m. to 8:00 a.m., the activity will be cancelled.  
2. For students who have declared to the school their eligibility for a full grant of Financial Assistance from the Student Finance Office, or who are granted by the Comprehensive Social Security Assistance Scheme (CSSA), the fee of this activity will be waived.

Please sign the Reply Slip below and return it with fee to the staff-in-charge before 23<sup>rd</sup> November, 2020. Should you have any enquiries, please contact Mr. Cheong Ka Ho, the Activity Assistant, at 2109 4000.

Yours faithfully,

\_\_\_\_\_  
Mr. Law Wai Man  
Principal

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**Reply Slip**

\_\_\_\_\_ November, 2020

Dear Principal,

I have noted the details of the Circular 2020/2021 No.051 on "Hip Hop Dance Club" and

- \*  I allow my child to participate in the aforesaid activity and pay \$ \_\_\_\_\_.
- \*  I do not allow my child to participate in the aforesaid activity.

Signature of parent/guardian: \_\_\_\_\_

Name of parent/guardian: \_\_\_\_\_  
(Block Letter)

Contact telephone number: \_\_\_\_\_

Name of Student: \_\_\_\_\_ Class: \_\_\_\_\_ Class No: \_\_\_\_\_

\* Please '✓' in the box as appropriate.