

## Ling Liang Church E Wun Secondary School Parent-Teacher Association

37 Man Tung Road Tung Chung Hong Kong Tel. : 2109 4000 Fax : 2109 4066 Email : pta@llcew.edu.hk

12<sup>th</sup> November, 2015

Dear Parent Members,

### Inauguration of the 11<sup>th</sup> Executive Committee & Meeting with Class Teachers to Receive the Academic Reports of the First Uniform Test

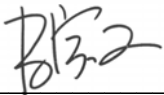
Please be informed that the inauguration of the 11<sup>th</sup> Executive Committee will be held at 7:30 pm on 4<sup>th</sup> December 2015 at the school hall. The composition of the committee is tabulated below:

Post	Chairman	Vice-chairman	Treasurer	Secretary	Liaison Officer	Recreation Officer
Parent	Ms. Helen Ma	Ms. Angel Ng	Ms. Chan Ganancial	Ms. Helen Tsang	Ms. Isa Lai	Mr. K K Kong
Teacher		Mr. S P Ning	Mr. H C Cheung	Mr. H L Ng	Mr. W W Ngai	Mr. W C Fung

During the ceremony, souvenirs will be presented to our ex-executive committee members: Mr. Angus Yu and Mr. Ricky Yu; and a certificate of appointment will also be presented to our legal adviser: Mr. Damy Lou.

After the ceremony, parents are welcome to go to the classrooms to meet class teachers to receive the academic report cards of the first uniform test.

Please sign and return the reply slip below to class teachers on or before 16<sup>th</sup> November, 2015. If there is any enquiry, please contact Mr. Ning, Vice Principal, on 21094000.



Ms. Helen Ma  
Chairlady  
LLCEWSSPTA



Mr. Wai-tung Wong  
Principal  
LLCEWSS

Ling Liang Church E Wun Secondary School Parent-Teacher Association

### Reply Slip

\_\_\_\_\_ November, 2015.

Dear Ms. Ma,

I have noted the details of the Circular PTA/1516/005 on "Inauguration of the 11<sup>th</sup> Executive Committee & Meeting with Class Teachers to Receive the Academic Reports of the First Uniform Test". My reply is as follow:

- \* I will attend the inauguration and meet with class teachers to receive the academic report.
- \* I will not attend the inauguration.

Name of Parent/Guardian in print : \_\_\_\_\_

Signature of Parent/Guardian : \_\_\_\_\_

Contact Phone Number : \_\_\_\_\_

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

\* Tick in the box provided as appropriate