



**SIR ELLIS KADOORIE SECONDARY SCHOOL (WEST KOWLOON)**

**No. 22 Hoi Fan Road, Tai Kok Tsui, West Kowloon.**

**Tel: 2576 1871 Fax: 2882 4548**

**E-mail address: sekss100@emb.gov.hk School Website: <http://seksswk.edu.hk>**

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10<sup>th</sup> November, 2016

Dear Parent/Guardian,

**School Picnic**

This year's school picnic will be held on 16<sup>th</sup> December 2016 (Friday). Details of the activity are as follows:

<b>Class</b>	<b>Level coordinator</b>	<b>Place of Departure</b>	<b>Destination</b>	<b>Time of Dismissal</b>	<b>Place of Dismissal</b>
S1	KWY	School	Aberdeen Country Park	3:30 pm	School
S2	FMK	School	Tai Mei Tuk Country Park	3:30 pm	School
S3	LMP	School	Sai Kung West Country Park (Pak Tam Chung)	3:30 pm	School
S4	YHY	School	Shek O	3:30 pm	School
S5	NML	School	Gold Coast	3:30 pm	School
S6	MWC	School	Kong Ha Au	3:30 pm	School

Coaches will be arranged to take students both to the picnic site and back to school. A transportation fee of \$40 will be collected. The remaining transportation cost will be subsidized by the school. Students are required to wear their PE uniform or tracksuit with long trousers and sports shoes. They should prepare their own lunch.

Please be informed that the School Picnic is an important school function in which all students must take part. **All students must arrive at school on that day before 8:15 am.** Coaches will depart at 8:30 am. Students who do not participate in this activity for health reasons must stay at school under normal school hours. Some assignments will be arranged for them to work on under the supervision of teachers.

Please sign the attached reply slip and return it with \$40 to your child's class teacher on or before **21<sup>st</sup> November 2016.**

For enquiries, please contact Mr LI Chi Ming or the undersigned at 2576 1871.

Yours faithfully,

(YEUNG KWONG Mong-ha)

Principal

**Reply Slip**  
**School Picnic**

To: Principal

I acknowledge receipt of your letter dated 10<sup>th</sup> November 2016 concerning the school picnic on 16<sup>th</sup> December 2016.

Please tick the appropriate box.

I agree that my child should take part in the school picnic on 16<sup>th</sup> December 2016 and I confirm that my child is in good health and is physically fit for this activity.

I disagree that my child should take part in the school picnic because \_\_\_\_\_  
\_\_\_\_\_ and I understand that my child must stay at school under normal school hours to do assignments arranged for him/her on 16<sup>th</sup> December 2016.

AND

I would like to apply for the School Based After-school Learning and Support Grant for my child/ward for the aforesaid activity. My financial status is as follows:

- We are receiving full grant of the Student Financial Assistance (SFA)
- We are receiving the Comprehensive Social Security Assistance (CSSA)
- We need financial assistance to pay for the expenses of the aforesaid activity.

Please specify your financial difficulties \_\_\_\_\_

Name of Student: \_\_\_\_\_

Class: \_\_\_\_\_ Class Number: \_\_\_\_\_

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

Parent's/Guardian's Name: \_\_\_\_\_  
(in BLOCK LETTERS)

Emergency Tel. No.: \_\_\_\_\_

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