



Chiu Sheung School, Hong Kong
79B Pok Fu Lam Road, Hong Kong
Tel : 2546-1644 Fax : 2517-2483
Website : www.csshk.edu.hk



29th January, 2024

Dear Parents/Guardians,

Fun Bowling Program 2023-2024 No.e173B
(To: P2 to P3 students)

This year, our school has introduced a new bowling activity with the aim of exposing students to various types of sports. Participating students will be accompanied by teachers to the Hong Kong Country Club on Fridays after school for the activity. Students will be dismissed at the Ocean Park MTR Station after the activity.

For the first four sessions, students will be coached by a professional coach. The subsequent sessions will be supervised by teachers while the students engage in the activity. The details of the "Fun Bowling Program" are as follow:

Date:	Year 2024 23/2、15/3、12/4、19/4、26/4、3/5、10/5、17/5、24/5 (Friday)
Time:	3:30 p.m. - 4:30 p.m.
Venue:	Hong Kong Country Club
Dismiss Venue:	Ocean Park Station Exit B
Teacher in charge:	Mr. Samuel Liu
Fee:	\$500
Payment methods:	Payment by eClass payment system (Alipay) or by cheque (should be made payable to "The IMC of Chiu Sheung School, Hong Kong")
Quota:	18
Attire:	P.E. uniform
Remarks:	<ol style="list-style-type: none">1. For over enrolment, lots will be drawn.2. Parents do not need to pay the fee now. Successful applicants will be notified by 2/2. Payment should be made by 6/2, otherwise the place will be released to students on the waiting list.3. Students who have not received an acceptance notification by 2/2 should consider the application unsuccessful.

Please return the reply slip to the class teacher on or before 31th January.

Thank you for your attention.

Mr. Chin Hon Ming
Principal, CSSHK

To: CSSHK

Class No:()

Reply Slip for Notice on Fun Bowling Program 2023-2024 No.e173B

I acknowledge receipt of the notice on Fun Bowling Program, and I

☐ agree my child to participate in the program.

And my child will ☐ be picked up by parent.

☐ return home on his/her own.

I will settle the payment by

☐ eClass payment system (Alipay)

☐ cheque (payable to "The IMC of Chiu Sheung School, Hong Kong")

☐ do not agree my child to participate in the program.

Name of student: _____

Class: _____

Name of parent: _____

Signature: _____

Contact phone number: _____

Please tick the appropriate box.

31-01-2024 Nap