



基督教培恩小學

Christian Pui Yan Primary School

Address: 2 Tin Yip Rd, Tin Shui Wai Telephone no.: 2342 0555 Fax no.: 3401 4724 website: www.cpyps.edu.hk

Notice(2024/25-102)

Dear parents,

Jazz Dance Team Additional Practice Notification

The dance competition is approaching (on 13 or 14/12). To improve skills and enhance teamwork, the Jazz dance team will hold additional practice sessions. The training details are as follows:

		Monday	Friday	Tuesday
Date	October	28	25	
	November	4, 11	1, 8	26
	December	2, 9		
Time		2:45 p.m. – 4:15 p.m. / 4:50 p.m.	3:20 p.m. – 4:15 p.m. / 4:50 p.m.	1:00 p.m. – 2:20 p.m.
Venue		RM401 and 111	Hall	Hall
Remarks	1. Students who take the nanny bus will leave school at 4:15 p.m. Parents can also choose students to stay in school for training until 4:50 p.m. or leave school on their own. 2. On 26 th November, there is NO nanny bus after the additional practice and students need to prepare their lunch. 3. Students must attend all training sessions punctually. Unexcused absences will be referred to the disciplinary department for further action. 4. Please wear PE uniform.			
Teacher in charge	Ms. Mok Tsz Yan, Ms. Cheung Sin Yi			

Please kindly fill in the reply slip and return to the teacher in charge on or before 25 October 2024. If you have any enquiry, please contact the teacher in charge, Ms. Mok Tsz Yan or Ms. Cheung Sin Yi via phone.

Yours faithfully,

Principal 
Ms. Cheung Ching Han

23 October, 2024

Reply Slip (2024/25-102)

PIC: Ms Mok Tsz Yan

Dear Principal Cheung,

Jazz Dance Team Additional Practice Notification

I understand the information above,

1. I * agree / do not agree * with my child to participate in the additional practice of the "Jazz Dance Team".
2. After the additional practice on Monday and Friday, students will* **take the nanny bus at 4:15pm to go home / students to leave on their own / parents to pick them up.**
3. After the additional practice (26/11), students will* **leave on their own / parents to pick them up.**

Class: _____ students : _____ ()

Guardian's Contact number : _____

Guardian's name : _____

_____ October , 2024

Guardian's signature : _____

Remark Please cross out as necessary.