



ST. LOUIS SCHOOL

Circular No. 80a (17-18)

9th October, 2017

Dear Parents/Guardians of S1 NCS students,

Re: NCS Outdoor Learning Programme 2017-18 (S1)

To diversify students' learning experience, our school has organized an Outdoor Learning Programme for NCS students in this school year. Students are expected to learn more about Chinese culture and Hong Kong traditions outside school. Students are required to hand in a brief report after each outdoor visiting. Details of the activities are described below:

<i>Date</i>	<i>Venue</i>	<i>Gathering Time and Place</i>	<i>Dismissal time and place</i>
17/10/2017 (Tue)	Hong Kong Science Museum	13:00 outside Staff Room	16:00 at the Venue
27/10/2017 (Fri)	Kowloon Walled City Park		
14/11/2017 (Tue)	Chi Lin Nunnery		
27/11/2017 (Mon)	Zero Carbon Building		
3/1/2018 (Wed)	Museum of Tea Ware		
17/1/2018 (Wed)	Art Museum Institute of Chinese Studies		
29/1/2018 (Mon)	Hong Kong Heritage Museum		
9/2/2018 (Fri)	Chinese New Year Flower Market		
5/3/2018 (Mon)	Hong Kong Maritime Museum		
15/3/2018 (Thu)	Jao Tsung-I Academy		
16/4/2018 (Mon)	Dialogue in the Dark Tour		
27/4/2018 (Fri)	Heritage of Mei Ho House Museum		
10/5/2018 (Thu)	The Peak	12:00 Outside Staff Room	15:00 at the Venue
23/5/2018 (Wed)	Hong Kong Wetland Park		
5/6/2018 (Tue)	Buddha		

* This schedule may be subject to change but we will endeavor to keep the final schedule as close as possible to what appears here.

Students are invited to participate in the captioned activity as this activity can broaden their horizons and enrich their learning experiences. Please return the following reply slip to Mr. Wong Tsz Yin Kevin on or before 13th October, 2017. Should there be any enquiries, please contact Mr. Wong Tsz Yin Kevin (teacher-in-charge) at 2546 0117.

(Mr. Wong Tsz Yin Kevin)
for the Principal

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Reply slip

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Re: NCS Outdoor Learning Programme 2017-18 (S1)

Dear Principal,

I *allow/do not allow my child _____ of Class _____ (No. _____) to take part in the activities listed above.

Signature of Parent/Guardian : _____

Name of Parent/Guardian : _____

Emergency Contact Number : _____

Student's Mobile Number : _____

Date : _____

* Please delete as appropriate.

S1 OLP