

ST. LOUIS SCHOOL Circular No. 056 (24-25)

10th September, 2024

Dear Parents/ Guardians,

Re: Prefects for Tomorrow Training Camp

We are delighted to inform you about an upcoming training camp organized for our S1 to S5 students. The camp aims to foster teamwork and leadership skills among students; enhance problem-solving and decision-making abilities and provide a fun and engaging outdoor experience.

Details are as follows:

Dates	:	$21^{\text{st}} - 22^{\text{nd}}$ September, 2024	
Venue	:	Jockey Club Cheung Chau Don Bosco Youth Centre	
Camp Fee	:	HKD 250 per student (subsidized by the school)*	
Activities	:	High structure adventure (with professional coaching) and other team-	
		building exercises	
Gathering	:	Gather at Central Pier No. 5 at 1:30 p.m. on 21st September	
Dismissal	:	Cheung Chau Pier at 1:30 p.m. on 22 nd September	
Points to note	:	Students are strongly prohibited from leaving the camp without the	
		permission of teacher-in-charge	
Teacher-in-charge	:	Mr. Lui Yiu Sun and Mr. Kwok Hui Kin	

*Dinner on 21st September and breakfast and lunch on 22nd September are included. The transportation fee is not included.

Please ensure your child is physically fit and suitable for outdoor activities, especially the high structure adventure. Participants should bring along appropriate clothing, footwear (sports shoes), and personal items. With regards to any medical concerns or dietary restrictions, please notify the school in advance.

We believe this training camp will be a valuable experience for your child. Please complete the reply slip together with the payment (either in cash or a cheque payable to "The IMC of St. Louis School") to Mr. Lui Yiu Sun by 17th September, 2024.

Thank you for your support.

Your faithfully, (Mr. Lui Yiu Sun) for Principal

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Reply slip

Circular No. 056 (24-25)

<u>Re: Prefects for Tomorrow Training Camp</u>

Dear Principal,

I have read and noted the content of the circular no. 056 (24-25), and

□ I agree to my child ______ of Class _____ (No. ____) attending the activity on time in the said period. I hereby acknowledge that he is physically fit to participate in the activities mentioned in the circular.

□ Please note that my child has the following medical concerns and/or dietary restrictions#:

□ I do not agree to my child ______ of Class _____ (No. ____) attending the activity.

*Please tick as appropriate and fill in any required information.

If there are no medical concerns or dietary restrictions, please simply write "None" in the designated space.

Signature of Parent/Guardian	:
Name of Parent/Guardian	:
Emergency Contact Number	:
Student's Mobile Number	
	•
Date	:
Emergency Contact Number Student's Mobile Number	