

**Confucius Hall Secondary School**  
**Circular on the School Activities**

**SA2018029E**

Date: 22-10-2018

Name of Activity: Student Leadership Training Program (Form Four students only)  
Activity Venue: Shooting Workshop (Cheung Sha Wan) <http://shootingworkshop.com>  
Activity Date: 26-10-2018  
Activity Time: 9:45a.m-3:30p.m.  
Assembly Venue: School  
Dismissal Venue: School  
Fees: The program "Energetic@CHSS 2017-2019" is subsidized by the Beat Drug Fund from the HKSAR Security Bureau.  
Teacher-in-charge: Coordinator:Ms. MOK (Student Affairs Team) Leading Teacher: Class Teachers  
Remark(s):  
1. Students should wear school P.E. Uniform.  
2. Students must follow the instructions of the coaches.

\_\_\_\_\_  
School Chop

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Reply Slip

(Please return to class teachers by 24-10-2018)

**SA2018029E**

(Please put a '✓' in the appropriate box)

Dear Principal,

I have noted the details of the **Student Leadership Training Program (Indoor war game workshop)** and I agree my son/daughter to participate in the activity.

Emergency Contact Person:	_____
Emergency Contact Telephone No.:	_____
Relationship:	_____
Student Contact No.:	_____

Class: \_\_\_\_\_ ( )  
Name of Student: \_\_\_\_\_  
Name of Parent / Guardian: \_\_\_\_\_  
Signature of Parent / Guardian: \_\_\_\_\_  
Date: \_\_\_\_\_

孔聖堂中學  
家長同意書

SA2018029C

活動名稱：中四級領袖訓練工作坊

活動地點：Shooting Workshop (SWS)射擊工作室(長沙灣) <http://shootingworkshop.com>

活動日期：2018 年 10 月 26 日

集合時間：上午 9 時 45 分 解散時間：下午 3 時 30 分

集合地點：學校 解散地點：學校

費用：本活動屬健康校園計劃 Energetic @CHSS (2017-2019) 之一，所有費用由禁毒基金資助。

負責老師：統籌：學生事務組莫玉玲老師 帶隊：中四級班主任

備註：1. 同學需穿著本校運動服，帶備毛巾。2. 學生在活動期間必須依從導師指示。

校方印鑑

2018年10月22日

回 條

敬覆者：

SA2018029C

本人知悉 \_\_\_\_\_ 班學生 \_\_\_\_\_ ( ) 參加

健康校園計劃 Energetic @CHSS (2017-2019)：中四級領袖訓練工作坊【Shooting Workshop (SWS)射擊工作室】。

此覆

孔聖堂中學

緊急聯絡人：\_\_\_\_\_

緊急聯絡人電話：\_\_\_\_\_

與學生關係：\_\_\_\_\_

學生聯絡電話：\_\_\_\_\_

家長 / 監護人簽署 / 印鑑

\_\_\_\_\_年\_\_\_\_月\_\_\_\_日