

德貞女子中學
二零二三至二零二四年度
英文科話劇比賽通告

敬啟者：

為擴闊學生學習經歷，本校英文科將參與話劇比賽，詳情如下：

活動項目：	Speak Up - Act Out Drama Competition 2023/24
日期：	2024 年 4 月 25 日
活動地點：	香港培道中學 (九龍城延文禮士道 2 號)
集合時間及地點：	上午 10 時 45 分 (本校)
解散時間及地點：	下午 5 時 30 分 (香港培道中學)
費用：	全免
負責老師：	李文慧老師、Mrs. Rebecca Ewal 及 Ms. Gemma Norkett
備註：	參賽學生已提前回校練習，訓練時間如下： 11-12/4、15-19/3 及 22-24/4 15:30-16:30 (如當日有課後測驗或活動會順延練習至 17:30 結束)

請著 貴子女於 4 月 19 日前，把回條交回負責老師，並請督促 貴子女依時出席活動。如有任何問題，請致電 2729 3211 與李文慧老師聯絡。

此致
學生家長

德貞女子中學校長

謹啟

二零二四年四月十六日

-----回 條-----

編號：257

敬覆者：

本人已知悉小女參加 Speak Up - Act Out Drama Competition 2023/24 活動，定當督促小女依時出席活動。

此覆
德貞女子中學校長

中____級____班____號學生：_____

學生家長/監護人簽署：_____

學生家長/監護人姓名：_____

學生家長/監護人電話：_____

二零二四年 月 日

(收集家長/監護人聯絡電話，目的是讓負責老師在有需要時聯絡家長，有關資料將於活動完結後銷毀。)

Tack Ching Girls' Secondary School
2023-2024
English Drama Competition

16th April, 2024

Dear Parents/ Guardians:

To enrich students' learning experience, a drama competition is introduced by the English Department. Please kindly find the full details below:

Activity:	Speak Up - Act Out Drama Competition 2023/24
Date:	25 th April, 2024
Location:	Lecture Theatre, Pooi To Middle School, 2 Inverness Road, Kowloon City, Kowloon, Hong Kong
Gathering Time & Place:	10:45 (at school)
Dismissing Time & Place:	17:30 (Pooi To Middle School)
Fee:	Free of Charge
Teacher-in-charge:	Ms. Li Man Wai Grace, Mrs. Rebecca Ewal & Ms. Gemma Norkett
Note:	Students participants have to come back to school for practice: 11-12/4, 15-19/3 & 22-24/4 (Training will be postponed to 16:30-17:30 if there is any after-school tests or activities)

Please complete the reply slip and return it to teachers-in-charge by 19/4, and prompt your child to participate in the above activity punctually. If you or your child have any enquiries, please feel free to contact Ms. Li Man Wai Grace at 27293211.

Yours faithfully,

Hui Yin Shan
Principal

-----Reply Slip-----

No. : 257

_____ April, 2024

Dear Principal,

I have been informed that my child will participate in Speak Up - Act Out Drama Competition 2023/24 and will urge her to attend the above activity punctually.

Name of student: _____

Class & Class No.: _____ ()

Signature of Parent / Guardian: _____

Name of Parent / Guardian: _____

Telephone number of Parent / Guardian: _____

(Collection of parents' contacts is for safety reason in case of emergency. The information will be discarded after the activity.)