



敬啟者：

本會一直致力維繫家長感情，透過舉辦各類活動，讓家長義工們聚首暢談分享、互相溝通，增進情誼。本會擬於本學年下學期，舉辦下列活動，歡迎各位踴躍參加，詳情如下：

活動名稱	日期	內容	地點	名額	費用
烹飪班	10/5/2017(三) (下午 2:00-4:30)	心太軟	本校	15 人	\$30
	17/5/2017(三) (下午 2:00-4:30)	造型包	本校	15 人	\$30
	24/5/2017(三) (下午 2:00-4:30)	唧花曲奇	本校	15 人	\$30
	31/5/2017(三) (下午 2:00-4:30)	鳳梨酥	本校	15 人	\$30
聖約翰急救 証書班	3/7, 4/7, 5/7, 6/7 共 4 天 (上午 9:00-下午 5:30)	介紹急救的原則、心肺復 甦法及急救處理方法	本校	10 人	\$300

以上活動名額有限，家長義工可獲優先取錄。若閣下有興趣參加以上活動，請填寫下列回條，於四月二十七日前交回校務處鄧小姐。

仁愛堂田家炳中學
家長教師會謹啟

二零一七年三月三十一日

回條（請於 27/4 前交回校務處鄧小姐）

敬覆者：

本人知悉 貴會主辦以下活動，並決定參

活動名稱	日期	內容	參加
烹飪班	10/5/2017(三) (下午 2:00-4:30)	心太軟	\$30 <input type="checkbox"/>
	17/5/2017(三) (下午 2:00-4:30)	造型包	\$30 <input type="checkbox"/>
	24/5/2017(三) (下午 2:00-4:30)	唧花曲奇	\$30 <input type="checkbox"/>
	31/5/2017(三) (下午 2:00-4:30)	鳳梨酥	\$30 <input type="checkbox"/>
聖約翰急救証書班	3/7, 4/7, 5/7, 6/7 共 4 天 (上午 9:00-下午 5:30)	介紹急救的原則、心肺 復甦法及急救處理方法	\$300 <input type="checkbox"/>

（請在 ☐ 內用 ‘✓’ 表示）

此覆
仁愛堂田家炳中學
家長教師會

班別：_____ 座號：_____ 學生姓名：_____

參加家長姓名：_____ 聯絡電話：_____

家長簽署：_____



No.16-17/54

31 March 2017

The Parent-Teacher Association has dedicated much effort to building networks among parents. Various activities have been organized to provide parent volunteers with opportunities to get together, share, communicate and build networks among each other. The Association will organize a range of activities in the second term of the current school year. Details are as follows and parents are invited to join:

Activity	Date	Topic	Venue	Quota	Fee
Cooking class	10/5/2017 (Wed) (2:00-4:30 pm)	Chocolate fondant	The school	15	\$30
	17/5/2017 (Wed) (2:00-4:30 pm)	Bread in different shapes	The school	15	\$30
	24/5/2017 (Wed) (2:00-4:30 pm)	Flower-shaped cookies	The school	15	\$30
	31/5/2017 (Wed) (2:00-4:30 pm)	Pineapple pastries	The school	15	\$30
St. John's Ambulance first aid certificate course	3/7, 4/7, 5/7, 6/7 (9:00 am - 5:30 pm)	Overview of first aid principles, CPR and first aid handling	The school	10	\$300

Parent volunteers will be given priority for the above activities due to the limited quota. Interested parents are advised to complete the reply slip below and have it returned to Ms Tang of the school office by 27 April.

Parent-Teacher Association

Reply slip (to be submitted to Ms Tang of general office by 27/4)

_____ April 2017

I am notified of the activities organized by the Parent-Teacher Association and have decided to:

Activity	Date	Topic	Participate in
Cooking class	10/5/2017 (Wed) (2:00-4:30 pm)	Chocolate fondant	\$30 <input type="checkbox"/>
	17/5/2017 (Wed) (2:00-4:30 pm)	Bread in different shapes	\$30 <input type="checkbox"/>
	24/5/2017 (Wed) (2:00-4:30 pm)	Flower-shaped cookies	\$30 <input type="checkbox"/>
	31/5/2017 (Wed) (2:00-4:30 pm)	Pineapple pastries	\$30 <input type="checkbox"/>
St. John's Ambulance first aid certificate course	3/7, 4/7, 5/7, 6/7 (9:00 am - 5:30 pm)	Overview of first aid principles, CPR and first aid handling	\$300 <input type="checkbox"/>

(Please mark a '✓' in the appropriate ☐)

Class: _____ Class number: _____ Name of student: _____

Name of parent: _____ Parent's contact number: _____

Parent signature: _____