

德貞女子中學
二零二五至二零二六年度
英文科 Speak Up-Act Out Drama Competition 英語話劇比賽綵排家長通告

敬啟者：

貴子女已報名參加英文科活動(Speak Up – Act Out Drama Competition 英語話劇比賽)。為讓學生更好地為是次比賽作準備，本校特安排三次課後綵排，詳情如下：

活動項目：	英文科活動 (Speak Up Act Out – Drama Competition 英語話劇比賽) 課後綵排
活動日期：	30/1、2/2、6/2 /2026 (共 3 節)
活動時間：	下午 3 時 30 分至下午 5 時 15 分
活動地點：	本校 401 室
費用：	免費
負責老師：	黎麗瑩老師及 Alena Kuptsevich 老師
備註：	1. 同學必須準時出席綵排。 2. 倘若缺席，同學必須提交家長信予負責老師請假。

請於 1 月 29 日前簽妥通告，把回條交回負責老師，並請督促 貴子女依時出席綵排。如有任何問題，請致電 2729 3211 與負責老師聯絡。

此致
學生家長

德貞女子中學校長

謹啟

二零二六年一月二十七日

----- 回 條 -----

編號：254

敬覆者：

本人已知悉小女參加 貴校英文科 Speak Up – Act Out Drama Competition 英語話劇比賽課後綵排，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：_____

家長聯絡電話：_____

學生聯絡電話：_____

二零二六年 月 日

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

Tack Ching Girls' Secondary School
2025-2026 English Department Activity
Speak Up – Act Out Drama Competition Rehearsals

27th January, 2026

Dear Parents / Guardians,

Your daughter will participate in the Speak Up – Act Out Drama Competition. To prepare her for the event, three after-school rehearsal sessions have been scheduled. The details are as follows:

Activity:	Speak Up – Act Out Drama Competition after school rehearsals
Date:	30 th January 2026, 2 nd February 2026, 6 th February 2026 (3 sessions)
Location:	Room 401
Time:	3:30 p.m. to 5:15 p.m.
Fee:	Free of charge
Teachers-in-charge:	Ms Daphne Lai & Ms. Alena Kuptsevich
Notes:	<ol style="list-style-type: none"> 1. Students must attend the rehearsals punctually. 2. If a student is absent, a parent's letter must be submitted to the teacher-in-charge.

Please complete the reply slip below and return to the teacher-in-charge by **29th January, 2026 (Thursday)**, and remind your child to attend the above rehearsals punctually. For any enquiries, please feel free to call 2729 3211 to contact the teacher-in-charge.

Yours faithfully,

Carol Chung
Principal

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

No.: 254

_____ January, 2026

Dear Principal,

I read in the acknowledgement of the above notice in connection with the activity and the relevant arrangements. My child will participate in Speak Up – Act Out Drama Competition after-school rehearsals.

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.)