



# 惠僑英文中學

## WAI KIU COLLEGE

九龍石硤尾偉智街十七號

17 Wai Chi Street, Shek Kip Mei, Kowloon, Hong Kong.

電郵地址(E-mail): wkc@wkc.edu.hk

電話: 852-2777 6289 傳真: 852-27767727

Tel: 852-2777 6289 Fax: 852-27767727

網址(Website): <http://www.wkc.edu.hk>

Ref. No. : SGS\_ECA\_SS24-25/13A

Dear Parents/Guardians,

### Voluntary Work: Visit the elderly Centre (5C)

In order to express our love and concern with the elderly, so that students can build a sense of responsibility and self-confidence, and lead a healthier and more active life, the Social Services Committee will cooperate with the Summer Palace Nursing Center to arrange inter-class volunteer activities for students to visit the Summer Palace Nursing Center on Friday. Please read the following details and submit the reply slip to the class teachers.

The details of the activity are as follows:

The details of the activity are as follows:

Activity	Visit the Elderly Centre	Teachers-in-charge	YEUNG Yuk-Hoi, CHUI Siu-Ting and CHAU Chung-Yin
Date	2 <sup>nd</sup> May, 2025 (Friday)	Transportation	School bus
Venue	the Summer Palace Nursing Center	Fee	Free
Meeting time	1.20 p.m.	Meeting venue	5C Classroom
Dismissal time	4.00 p.m.	Place of dismissal	School
Remarks	1. Students must wear proper uniforms. 2. Students must adhere to the teacher's instructions. Any violation will be dealt with in accordance with school regulations. 3. In case of bad weather on the day of the event, the teacher will arrange for the students to return home as soon as it is safe to do so.		

Please complete the reply slip and return it to Class teacher no later than Friday, April 3, 2025. Please contact Mr. Yeung Yuk-Hoi if you have any questions about the above activity at 2777-6289.

Yours faithfully,

TSO Tat-Ming  
(Principal)



-----✂-----Reply slip-----✂-----

SGS\_ECA\_24-25/13A

I acknowledge the details of the 'Visit the Elderly Centre' voluntary work which will be held on 2/5/2025.

Name of Student : \_\_\_\_\_  
 Class and Class No. : \_\_\_\_\_  
 Signature of Parent / Guardian : \_\_\_\_\_  
 Name of Parent / Guardian : \_\_\_\_\_  
 Date : \_\_\_\_\_

\* Delete where appropriate