



天水圍香島中學

HEUNG TO MIDDLE SCHOOL (TIN SHUI WAI)

<http://www.heungto.net>

HEUNG TO MIDDLE SCHOOL (TIN SHUI WAI)(P004-2019)

ABOUT PHYSICAL EDUCATION

September 2, 2019

Dear Parents/ Guardians,

In order to enhance a balance development of our student in the aspect of "Moral, Intellectual, Physical, Social and Aesthetic", physical education lesson is part of our school curriculum. Regular physical exercise can enhance health and wellness of youth. However, if your child has illness or you do not know whether your child is suitable to take part in physical education lessons or not, you should seek medical advice. In order to understand the health condition of your child, please complete "Medical History of Student" and "Parental consent on participation in physical education lessons". Parents who have doubts on the health condition of your child, you should immediately to seek diagnosis from the registered doctors.

If your child needs to be temporarily or perpetually exempted from physical education lessons, a medical certificate from a registered doctor must be produced.

The score of physical education lesson is assessed by continual evaluation of student's performance on different discipline. If there are any changes in your child's health condition and have to temporarily exempted from physical education lesson or assessment, please apply exemption with medical certificate with reason and exemption period from a registered doctor.

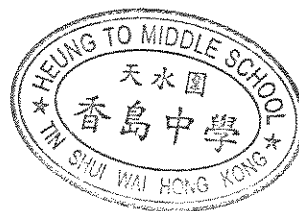
Besides, on the day that student has PE lesson (including rainy day), you are requested to ask your children to wear their proper PE uniform to school. The requirement of school uniform can be found in "Appearance and School Uniform (2019-2020)".

Please complete Part 1 and Part 2 and return the reply slip to the class teacher on 4 September 2019.

Thank you for your attention.

Yours truly,

Heung To Middle School (Tin Shui Wai)





(P004-2019)Reply Slip

(Restricted – The information provided will only be used for the purpose of the pupil’s health reference)

2. If the student is considered not suitable for participation in PE lessons or any other type of school activities, please specify and submit a medical certificate for school’s reference.

3. Any other remarks :

Part 1: Medical History of Student (to be completed by parent/guardian)

Name : _____

Class No: _____

Sex: _____ Class: _____

Date of Birth: ____ / ____ / ____ (DD/MM/YY)

1. If the student has ever had the following medical condition(s), please tick in the appropriate box and specify details.

Table with 3 columns: Condition, Age Detected, Details of Disease. Rows include G6PD deficiency, Bronchial asthma, Epilepsy, Fits due to fever, Kidney disease, Heart disease, Diabetes mellitus, Hearing defect, Haemophilia, Anaemia, Other blood disease, Allergy to drugs, Allergy to vaccines, Allergy to food, Other allergies, Tuberculosis, Minor operation, Major operation, Others.

Part 2 Parental consent on participation in physical education lessons (Please tick in the appropriate box)

I acknowledge receipt of this notice, my child _____ (name) of class _____.

- is suitable to take part in physical education lessons.
is not suitable to take part in physical education lessons. Relevant medical certificate is attached for your information and retention.
is excused from taking part in physical education lessons from _____ to _____. Relevant medical certificate is attached for your information and retention.

(Signature of Parent/Guardian)

(Name of Parent/Guardian)

(Emergency Contact telephone no.)

(Date)