



8 September 2008

Dear Parent/Guardian

### **CCA PROGRAMME FOR TRACK 3 STUDENTS**

We are delighted to inform you that your child has participated actively in the Percussions CCA in Term 3 and will be continuing with the CCA in Term 4.

As CCA is a part of your child's curriculum and holistic development, it is compulsory for all students to participate. The programme will commence in Week 2 of Term 4.

The school is heavily subsidizing the cost of organizing this activity. Due to the very specialized nature of the programme, parents will have to co-pay a nominal fee.

Fees details:

<b>CCA</b>	<b>Fees Payable by Parents</b>
<b>Percussions</b> Term 4	\$30 per term

### **Date & Time of CCA Activities**

The CCA programme is worked into your child's curriculum timetable and the details are as follows:

<b>Class</b>	<b>Day</b>	<b>Time</b>
<b>Edison, Keller</b>	Fridays	11am – 12pm
<b>Einstein, Galileo</b>	Fridays	12pm -1pm

### **Mode of Payment**

Payment for CCA should be made by **12 September 2008**. You can pay in the following ways:

- Cash: Please give the cash to your form teacher.
- Cheque: Kindly make payable to: Pathlight School

- Edusave: Kindly complete the attached Edusave form and submit to your form teacher if you would like to utilize your Edusave funds.

Kindly submit the reply slip/Edusave form to your form teacher by **12 September 2008, Friday**.

We believe your child will be enriched and achieve a holistic learning experience!

Yours sincerely,

Ms Linda Kho  
Principal

Cc Ms Denise Phua, School Supervisor, Pathlight School Board  
Ms Loy Sheau Mei, Vice Principal – Academics  
Ms Wong Yeok Lin, Track 3 Head  
Mrs Teh Tsui Tsui, Student Affairs Manager  
Ms Chin Li Ming, Operations Manager  
Mr Jason Kwek, Operations Executive  
All Track 3 Teachers



## CONSENT / INDEMNITY FORM

Pathlight School requests your confirmation and acceptance of your child's participation in the following programme / activity:

Name of programme / activity : Percussions

Purpose : Term 4 CCA

Name of Child : \_\_\_\_\_

Class : \_\_\_\_\_

Name of Parent : \_\_\_\_\_

I, **allow** my child to participate in the above activity. I know that Pathlight School will do its best to ensure the safety and well-being of the children. However, in the event of any accident occurring, I shall not hold Pathlight School responsible and neither will I allow or take any legal action and / or make any claims against the school, its teachers or the organizers of the activity.

\_\_\_\_\_  
Signature of parent / guardian

Relationship to child : \_\_\_\_\_

I will be paying by:  Cash  
 Cheque  
 Edusave

Please tick the method of payment and submit payment to form teacher by **12 September 2008, Friday.**

Date : \_\_\_\_\_

Telephone no. in case of emergencies: \_\_\_\_\_