



珠海橫琴中醫藥探索之旅—入選及繳費通知

各位家長：

感謝您支持 貴子弟參加本校舉辦的考察團活動。經過甄選與評估後，貴子弟已成功入選參加是次考察團活動。現向每位同學收取團費港幣 \$ 140元正。

有關活動資料茲列如下：

日期：2026年7月3日（星期五）

對象：中一至中二級同學

帶隊老師：李玉瑩老師、鄧耀忠老師、邵梓煒老師

人數：三十人（按教育局相關指引，境外交流團帶隊老師與學生人數比例最少為 1:10，是次活動已符合相關要求。）

費用：港幣 \$ 140[#]（已獲校方資助）

繳交費用方法：

請家長於繳費日期內以 eClass 電子支付系統付費或請同學將費用交予李玉瑩老師、鄧耀忠老師或邵梓煒老師。安排如下：

繳費日期	金額
2026年5月27日至6月3日	港幣 \$ 140 元

如有任何查詢，歡迎致電 2527 2427 與李玉瑩老師、鄧耀忠老師或邵梓煒老師聯絡。

學務主任 韓江老師

2026年5月27日

#費用詳情請參考「珠海橫琴中醫藥探索之旅」通告編號 AC 25-26_119。

學校活動家長通告
回 條

茲收到 貴校有關「珠海橫琴中醫藥探索之旅—入選及繳費通知」之通告[編號(AC 25-26_147)]，經已閱覽。

本人

*同意 小兒參與上述活動，並會繳付費用港幣 \$140元正。

*不同意 小兒參與上述活動。

學生姓名： _____
班別： _____ 學號： _____

2026年5月27日

家長或監護人簽署： _____

*註：請在合適的方格內加上✓

請同學於 2026年6月3日（星期三）或以前填妥回條



**Zhuhai Hengqin Traditional Chinese Medicine Exploration Tour
—Selection and Payment Notice**

Dear Parents,

Thank you for supporting your son's participation in the study tour organised by our school. After selection and assessment, your son has been successfully selected to join this study tour. A tour fee of HK\$140 per student will be charged.

The relevant activity details are as follows:

Date: 3rd July, 2026 (Friday)

Target: F.1 and F.2 students

Accompanying Teachers: Ms. Lee Yuk Ying, Mr. Tang Yiu Chung, Mr. Shiu Tsz Wai

Number of Participants: 30 (In accordance with Education Bureau guidelines for overseas study tours, the minimum teacher-to-student ratio is 1:10. This activity meets the requirement.)

Fee: **HK\$140** (subsidised by the school)

Payment Method:

Please pay via the eClass e-payment system by the due date, or have students submit their payments to Ms. Lee Yuk Ying, Mr. Tang Yiu Chung, or Mr. Shiu Tsz Wai. Arrangements are as follows:

Payment Period	Amount
27 th May to 3 rd June, 2026	HK\$140

For any enquiries, please contact Ms. Lee Yuk Ying, Mr. Tang Yiu Chung or Mr. Shiu Tsz Wai at 2527 2427.

Head of Board of Academic Studies
Mr. Hon Kong

School Activity Parent's Notice

Reply Form

I have received and read the letter of (AC 25-26_147) "Zhuhai Hengqin Traditional Chinese Medicine Exploration Tour—Selection and Payment Notice"

I

- * agree my son's participation in the above activity and will pay the fee of HK\$140.
- * do not agree my son's participation in the above activity.

Student's Name: _____

Student'

s

Class: _____ Number: _____

Signature of Parent or Guardian: _____

*Please tick ✓ in the appropriate box .

Please complete and submit the reply form by June 3rd, 2026 (Wednesday).