



**PATHLIGHT
SCHOOL**

The learning journey

31 July 2009

Dear Parents/Guardians

Photography and Video Team training

The Photography and Video Team training have been assigned to take photos for the school's outing for Term 3 and 4.

The purpose of the training is to brief them on their deployment and provide them with directions for their role.

Training will take place every Wednesday.

The details are as follows:

Dates	5 August 2009, Wednesday 12 August 2009, Wednesday 26 August 2009, Wednesday 2 September 2009, Wednesday
Venue	Pathlight School
Time	2:00pm – 3:30pm
Assembly and Dismissal point	Parents' Waiting Area
Attire	Pathlight School Uniform
Parents to note	Please ensure your child has sufficient lunch money. Please arrange transport home for your child on the respective Wednesdays.

We are sure the students will benefit from their respective roles as part of the team. We look forward to seeing their photos and videos.

Please ensure that your child submits the attached Consent Form to the form teacher by **3 August 2009, Monday.**

Yours sincerely



Ms Linda Kho
Principal

Cc Ms Denise Phua, School Supervisor, Pathlight School Board
Ms Loy Sheau Mei, Vice Principal – Academics
Ms Chin Li Ming, Operations Manager
Ms Teh Tsui Tsui, Student Affairs Manager



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CONSENT / INDEMNITY FORM

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

Name of programme / activity : Photography & Video Team Training

Purpose : _____

Date : As per letter attached

Time : 2pm - 3:30pm

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 : _____

Date : _____

Telephone no. in case of emergencies: _____

*Please delete accordingly