



PATHLIGHT
SCHOOL

Where lives are transformed

5 August 2009

Dear Parent/Guardian of _____

Invitation to participate in the Art Workshop for a Credit Suisse Project

Your child has been selected to attend the abovementioned workshop.

This workshop is part of a project with Credit Suisse, who would like to showcase the artworks of our students in their year-end collaterals.

Details of the Workshop are as follows:

Date	15 August 2009, Saturday
Time	9:30 am – 11:30am
Venue	Pathlight School Art Room (Level 4, Block C)
Facilitator	Mr Victor, Head, Pathlight Design Studio and Mr Edwin, art instructor with NAFA
Transport	Parents will have to arrange your transport to and from school. Pick Up point after workshop: Parents' Waiting Area
What to Bring	<ul style="list-style-type: none">• Art materials will be provided. However students may want to bring their own favourite art materials if they wish.• Light snacks will be provided.

Artist(s) whose artwork is selected will be acknowledged on the collaterals.

This is a valuable opportunity to showcase the strengths and talents of our students. Credit Suisse is one of our ardent supporters and we hope this will be a chance for our students to give back meaningfully.

Please fill in the attached response slip and return it by **7 August 2009, Friday**.

Thank you for yet another partnership in a special project!

Yours sincerely,

A handwritten signature in black ink, appearing to be 'Linda Kho', written in a cursive style.

Ms Linda Kho
Principal

Cc Ms Denise Phua, School Supervisor, Pathlight School Board
Mrs Mary Gilbert, Secondary Track Head
Ms Daphne Chern, Senior Corporate Communication & Operations Manager
Mrs Teh Tsui Tsui, Student Affairs Manager
Mr Victor Ong, Head, Design Studio



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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 : **Art Workshop for a Credit Suisse Project**

Date : **15 August 2009, Saturday**

Time : **9:30am to 11:30am**

Name of Child : _____

Class : _____

Name of Parent : _____

I, ***allow / will not 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

Date

Relationship to child : _____

Telephone no. in case of emergencies : _____

** Please delete accordingly*