



26 October 2009

Dear Parent/Guardian of _____,

PERFORMING ARTS TEAM'S PARTICIPATION IN RECOGNITION DAY

We are pleased to inform you that our Performing Arts Team will be participating in Recognition Day, a major school event, in November 2009.

This is part of the school's plans for holistic development as the students get opportunities for exposure in major school events.

Students will be receiving a certificate of participation on Recognition Day.

The details of the rehearsal are as follows:

Date	2 November 2009, Monday
Time	2pm to 3pm
Meeting & Dismissal Point	Designated Parents Waiting Area

Parents to note:

- Please ensure that your child has money/food for lunch before the training commences.
- Kindly arrange for your child to be picked up from Pathlight School at 3:00pm.

Kindly complete the consent form and submit it to the class teacher by **29 October 2009, Thursday.**

We also wish to thank you for your support for our Performing Arts activities and look forward to your child's participation in 2010's line up of exciting performing arts activities

Yours sincerely,

Ms Linda Kho
Principal

Cc Ms Denise Phua, School Supervisor, Pathlight School Board
Ms Loy Sheau Mei, Vice-Principal (Academics)
Ms Nur Akhmar, Performing Arts Team's Coach
Mr Edwin Munji, Ms Daphne Chern, Mrs Teh Tsui Tsui, General Office



**PATHLIGHT
SCHOOL**

The learning journey

CONSENT / INDEMNITY FORM

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

Name of programme / activity : _____

Purpose : _____

Date : _____

Time : _____

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