

19<sup>th</sup> May, 2025

Dear Parents/Guardians,

## **Re: Rehearsals and Performance**

**Congratulations!** We are delighted to inform you that your son, has been invited to showcase his award-winning movie dubbing performance at our upcoming S1 Orientation Day for the 2025-2026 Secondary One cohort. Your son/charge talent, which earned him and his fellow classmate first place in the recent Interclass Movie Dubbing Competition, will inspire and welcome our new students, fostering a sense of family spirit and pride in St. Louis BIG family.

# **Event Details**

• **Date:** 30 August 2025 (Sat)

• **Time:** 0900-1030

• Venue: School Hall, St. Louis School

• Attire: Summer School Uniform

### **Program Outline**

Your son will be invited to attend **two pre-show rehearsals at 1400-1600 on Thursday, 27**th **August 2025 and at 0900-1100 on Friday, 28**th **August 2025 at the School Hall**. He and his fellow S1B classmates will also present their winning performance to incoming students and parents. The event will conclude by 1030.

#### **Action Required**

Kindly complete and return the attached **Consent Form by Friday**, 30<sup>th</sup> May 2025 to Ms Emma FONG, his English teacher. The form includes:

- Permission for participation.
- Emergency contact updates.

#### **Supervision & Safety**

The event will be supervised by Ms Emma FONG and staff. All safety protocols will be observed.

We appreciate your support in nurturing your child's talents and contributing to our school. We look forward to celebrating your child's achievements!

Should you have any inquiries, please contact Ms Emma FONG at 2559 9084. Thank you for your cooperation.

Warm regards,
Ms Emma FONG
S1B English teacher
for Principal

# **Consent Form**

Student's Name:	Class: S1B ( )
Parent's Name:	Contact number:
☐ I grant permission for my child to particip	ate in the Orientation Day performance, which
means that he must attend the two pre-show	w rehearsals. Failure to do so means my son
forfeits the performance.	
☐ I decline participation due to:	
*Please tick $\square$ the appropriate box	
Emergency Contact Name:	Phone number:
Parent's Signature:	Date: