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## Woodlands Primary School

Reference 50 /2017

6 April 2017

Dear Parents/Guardians

### TRIP FOR INTERNATIONAL EXPERIENCE TO HONG KONG FOR P5 PUPILS 22 TO 25 MAY 2017

Woodlands Primary School has planned a trip for international experience to Hong Kong from 22 to 25 May 2017 for selected P5 pupils.

- 2 The objectives of this trip are to:
  - develop in our pupils the 21<sup>st</sup> Century Competencies of global awareness and cross cultural skills and sensitivities;
  - enable our pupils to display the values of Collaboration, Adaptability, Respect, Empathy (C.A.R.E.) in this trip; and
  - provide an opportunity for pupils to experience the vibrant culture unique to Hong Kong.
  
- 3 Pupils will be hosted by Sha Tin Wai Dr. Catherine F. Woo Memorial School, a local school in Hong Kong, where they will get an opportunity to interact with local pupils and understand their culture.
  
- 4 The entire programme costs **\$1,068** (before GST). The package includes a round-trip air ticket, accommodation, food (all meals), land tour (inclusive of admission to places of interest), school visits and group insurance. Please refer to Annex B (Payment Advice) for the breakdown of school's subsidy and co-payment amount.
  
- 5 Your child/ward has been selected for this programme. If you consent to your child's/ward's participation, please complete the attached Consent Form (Annex A) and Payment Advice (Annex B) and submit them together with the necessary documents through your child's form teacher by Monday, 10 April 2017.
  
- 6 In the event that you do not wish for your child/ward to participate in this programme, please complete the Reply Form (Annex C) and return it to your child's form teacher.

7 There will be a briefing for parents/guardians on Friday, 5 May 2017 at 4 p.m. in the school.

8 Do feel free to contact your child's/ward's form teacher or General Office at 62697410 should you need any clarification or assistance.

9 We look forward to your child's/ward's participation in this enriching programme.

Thank you.

Yours sincerely,



Winnie Tan (Ms)  
Principal

Enclosed:

- Tentative Itinerary
- Annex A Consent form
- Annex B Payment Advice
- Annex C Opt-out Reply Slip

**TRIP FOR INTERNATIONAL EXPERIENCE TO  
HONG KONG FOR P5 PUPILS  
22 May to 25 May 2017  
Tentative Itinerary**

Date / Day	Tentative Itinerary
Day 1 (22 May)  Meal on board / Lunch / Dinner	Assemble at Changi Airport
	Depart for Hong Kong
	Arrive at Hong Kong International Airport
	Lantau Island (by coach)
	Check-in hotel  Dinner, Reflection & Debrief
Day 2 (23 May)  Breakfast / Lunch / Dinner	School Immersion Programme
	Lunch
	Mapopo Community Farm
	Dinner, Reflection & Debrief
	Avenue of Stars / Heritage 1881
Day 3 (24 May)  Breakfast / Lunch / Dinner	School Immersion Programme
	Lunch
	Youth Education Series @ Hong Kong Disneyland Park
	Dinner, Reflection & Debrief
Day 4 (25 May)  Breakfast / Lunch / Dinner Meal on board	Check-out of hotel
	Tai O Fishing Village
	Check-in to Hong Kong International Airport for departure to Singapore
	Arrive in Singapore
	Parents/Guardians to fetch their children from Changi Airport

CONSENT FORM

**TRIP FOR INTERNATIONAL EXPERIENCE TO  
HONG KONG FOR P5 PUPILS  
22 TO 25 May 2017**

**A) PARENTAL CONSENT AND AGREEMENT**

I, \_\_\_\_\_, parent of \_\_\_\_\_ (5 COL \_\_\_\_\_)  
(Name of Parent / Guardian) (Child's name) (Class)

- (i) allow my child to participate in the Trip for International Experience to Hong Kong and any other meetings relating to the preparation for this programme.
- (ii) **agree to pay the full package cost of \$1,068 (subject to GST) should my child/ward be absent on the day of trip without any Medical Certificate (MC) or valid reasons.** If your child is unwell on departure day, a MC is required to certify that your child is unfit to travel. The school reserves the right to accept or reject the reasons for absence.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

**B) PERSONAL PARTICULARS OF CHILD**

Name in Block Letters: \_\_\_\_\_ Class: COL \_\_\_\_\_  
(According to Passport)

BC No: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Gender: F / M

Nationality: \_\_\_\_\_ Passport No: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Religion: \_\_\_\_\_ Blood Group: \_\_\_\_\_ T-Shirt Size: 32 34 36 38 40 42 44

**C) CONTACT DETAILS**

Residential Address: \_\_\_\_\_

\_\_\_\_\_ Postal Code: \_\_\_\_\_ Home Tel: \_\_\_\_\_

**Emergency Contact Person** (Please provide at least one contact person):

No	Name of Next-of-Kin	Relationship to Pupil	Contact No
1			
2			

## D) STUDENT MEDICAL RECORD

Please complete your child's/ward's existing medical condition(s) in the table below:

Medical Condition	Yes/No	If yes, please state the special precaution to take for my child/ward. <i>[Please attach supporting medical information from the attending doctor(s)]</i>
Epilepsy	Y / N	
Periodic Loss of Consciousness	Y / N	
Heart Condition E.g. blood pressure, circulatory condition	Y / N	
Ear Disorder	Y / N	
Respiratory Disorder e.g. Asthma	Y / N	
Is your child/ward on <u>regular</u> medication?	Y / N	
Has your child/ward been specifically told to modify his/her physical activity or exercise participation due to his/her medical condition?	Y / N	
Has your child/ward ever had any injury or bone/joint condition that may be aggravated by vigorous exercises or activities? E.g. arthrities	Y / N	
Other relevant medical information E.g. diabetes, high cholesterol	Y / N	
Food Allergies e.g. egg, peanuts	Y / N	
Other Allergies e.g. drug, medication, insect bites and stings	Y / N	
Does your child/ward have a special dietary requirement?  If NO, your child will be having non-vegetarian Halal meal.	Y / N	Please tick: <input type="checkbox"/> Vegetarian  <input type="checkbox"/> Others: _____

**E) BRIEFING FOR PARENTS**

Please indicate whether you are able to attend the briefing on Friday, 5 May 2017 from 4.00pm to 5.00pm in school.

- I will be able to attend.     I will not be able to attend.

Number of parents attending: \_\_\_\_\_

**F) SUBMISSION OF DOCUMENTS AND PAYMENT**

- Consent Form (Annex A)
- Payment Advice (Annex B)
- Form E3 – Application for Withdrawal of Funds From Edusave Account (S'pore Citizens)
- Application Form for Opportunity Fund (For those who are applying for the additional fund)
- Photocopy of child's passport (particulars page). Passport must be valid for a minimum of 6 months from date of departure.
- Cash / Cheque payment

PAYMENT ADVICE

**TRIP FOR INTERNATIONAL EXPERIENCE TO  
HONG KONG FOR P5 PUPILS – 22 TO 25 May 2017**

Pupil's Name: \_\_\_\_\_ Class: COL\_\_\_\_\_

Tick	Category	School's Subsidy	Opportunity Fund	Parent's Co-Payment using Child's Edusave Account or/and Cash #	Document(s) to complete
	<b>S'pore Citizens</b> who are under MOE / School-Based Financial Assistance Scheme.	\$628	\$330	\$110	Form E3 – Application for Withdrawal of Funds From Edusave Account  Approved use of Opportunity Fund.
	<b>S'pore Citizens</b> who are not under MOE / School-Based Financial Assistance Scheme with Gross Household Income less than or equal to <b>\$6,000</b> ; or Per Capita Income less than or equal to <b>\$1,500</b> .	\$628	\$220 (subject to approval)	\$220	Form E3 – Application for Withdrawal of Funds From Edusave Account  Application Form for Opportunity Fund
	<b>S'pore Citizens</b> who are not under MOE / School-Based Financial Assistance Scheme and Gross Household Income <b>above \$6,000</b>	\$628	Nil	\$440	Form E3 – Application for Withdrawal of Funds From Edusave Account

**# Note:**

- Pupils with insufficient Edusave account balance are required to pay the difference in cash or cheque.
- Parents may call 6260-0777 for enquiry on your child's Edusave account balance.
- All cheques to be made payable to "Woodlands Primary School".

**FOR CASH & CHEQUE PAYMENT DETAILS**

Cash: \$ \_\_\_\_\_  Cheque: \$ \_\_\_\_\_ Bank: \_\_\_\_\_ Cheque No: \_\_\_\_\_

\_\_\_\_\_  
Name of Parent/Guardian

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

