



St. Joan of Arc Secondary School

Address: 55 Braemar Hill Road, North Point, Hong Kong

Tel. 電話: 2578 5984 Fax. 傳真: 2578 5725

聖貞德中學

地址: 香港北角寶馬山道五十五號

Website 網址: www.sja.edu.hk

Notice to Parent / Guardian

Circular No.: CCA121/2025-2026

18th March 2026

Dear Parent or Guardian:

Prefect Council Training Camp

Our school has invited social workers from the Methodist Epworth Village Community Centre to conduct a two-day, one-night leadership training camp for prefect council members. The aim is to help prefects develop a stronger sense of belonging to the Prefect Council, build team spirit, and boost self-confidence. We sincerely invite your child to participate. The details are as follows:

Event :	Prefect Council Training Camp		
Date :	10-11/4/2026 (Fri and Sat)	Time :	Two days, one night
Venue :	Po Leung Kuk Jockey Club Pak Tam Chung Holiday Camp	Target student :	Members of the Prefect Council
TIC :	Mr. T. H. AU, Mr. W.T. TANG, and Ms. Afsar Shagufta Canapi	Fee :	Free of charge
Assembly Place and Time :	14:05 (10/4) at School-Covered Playground		
Dismissal Place and Time :	Around 14:30 (11/4) at Tin Hau MTR Station		
Remarks :	(1) 10/4 Return to school as usual and gather at the school-covered playground by 2:05 p.m. (2) Please wear the school PE uniform and sneakers, and also bring your sports attire and a change of clothes.		

Please sign the following reply slip and return it on or before 27/3/2026 (Friday). If you have any inquiries regarding the above event, please don't hesitate to contact Mr. T. H. AU, Mr. W.T. TANG or Ms. Afsar Shagufta Canapi at 2578 5984.

Mr. YUEN Cheung-oi (Principal)



Be determined and confident. Do not be afraid of them. Your God, the Lord himself, will be with you. He will not fail you or abandon you. (Deuteronomy 31:6)

Reply Slip

Circular No. CCA121/2025-2026

Prefect Council Training Camp

Dear Principal,

I, the parent/ guardian of _____ (student's name) (Class: _____ No: _____), acknowledge the receipt of the circular regarding Prefect Council Training Camp, and my child will participate in the activity.

Signature of Parent/Guardian: _____

Name of Parent/Guardian: _____

Emergency contact no.: _____

Date: _____

*delete the inappropriate