



JURONG WEST PRIMARY SCHOOL  
30 Jurong West St 61 Singapore 648368  
Tel: 67933419 Fax: 67936593  
email: jwps@moe.edu.sg

Our ref: JWPS/2022/046

Date: 22 June 2022

Through the Principal

Dear P5 Parents/ Guardians,

**P5 National Education (NE) Show at The Floating Platform**

1. This is to inform you that your child is required to attend the following activity:

Activity	Venue	Date	Time
NE Show 2022	The Floating Platform	9 July 2022, Saturday	2.30 p.m. – 10.30 p.m. (This is an <b>estimated arrival time</b> . Students might reach school earlier or later. )

2. All students are required to put on their **usual school attire** on that day.
3. Students are to report to school **punctually at 2.30 p.m.** No students are allowed to come earlier than the stipulated time. Students are reminded to **eat their lunch before coming to school**. Dinner will be provided by the school and students will consume their dinner at the Floating Platform.
4. Students need to bring along **enough plain water** for their consumption throughout the show (recommended to bring at least 1000ml).
5. Students are **not allowed to bring umbrella** for safety reason. However, they need to bring a **raincoat/poncho** in case it rains.
6. Students are reminded **not to bring a big bag** as they will be receiving the goody bag. This is to ensure that students do not carry too many bags and to ease their movement.
7. Students are **discouraged from bringing along expensive gadgets and large amount of money**.
8. Parents who will be fetching their child on that day, please wait for **your child in school** and not at the Float. This is due to safety reasons. Thank You.

Yours sincerely,

Mdm Hazilah  
HOD CCE

## Acknowledgement

### NE Show 2022

I have read the letter dated 22 June 2022 and the contents are noted.

☐

I will be fetching my child home from the school on 9 July 2022.

☐

I will **not** be fetching my child home from the school on 9 July 2022.

Name of Student: \_\_\_\_\_

Class: \_\_\_\_\_

Medical condition (if any): \_\_\_\_\_

Allergy (if any): \_\_\_\_\_

Fully vaccinated (COVID): \*Yes / No

Chronic lung/heart disease: \*Yes / No

Meal preference: \*Vegetarian / Non-vegetarian

Name of Parent: \_\_\_\_\_

Parent's Contact number: \_\_\_\_\_

Relationship to student: \*Mother / Father / Guardian

\*Delete where necessary