中華基督教會桂華山中學

THE CHURCH OF CHRIST IN CHINA KWEI WAH SHAN COLLEGE

地址 ADDRESS:香港北角雲景道62號 62, Cloud View Road, North Point, Hong Kong 電話 TEL: 2571 1285 傳真 FAX: 2807 0085 網頁 WEB: www.ccckws.edu.hk 電郵 EMAIL: mail@ccckws.edu.hk

Special Notice (2020/2021) No. 13 COVID-19 Vaccination Programme – Vaccination Arrangement ((S.1, S.2, S.4S)

28th June, 2021

Dear Parent/Guardian,

Please be informed of the following:

Arrangement has been made for your child/ward to receive the "Comirnaty" vaccine from Fosun Pharma/BioNTech at the <u>Queen Elizabeth Stadium Community Vaccination Centre</u> (CVC) at the time slots stated below. Would your child/ward please report to this school at the assembly time on the designated date and go to the CVC with teachers for vaccination by school bus.

	Date and Time of Vaccination	Gathering Time at School
1 st Dose	30/06/2021(Wednesday) 2:30 p.m.	1:30 p.m.
2 nd Dose	21/07/2021(Wednesday) 2:30 p.m.	1:30 p.m.

Please read and note the following:

- 1. Please consult your family doctor on the suitability for vaccination, if necessary.
- 2. Comirnaty vaccine should be administered 14 days before or after another prophylactic vaccines.
- 3. Please bring along the original identity documents.
- 4. Please have breakfast and lunch on the vaccination day (Students have to arrange by themselves).
- 5. Please wear clothing / school PE uniform with easy access to the arm.
- 6. The vaccination normally takes around one hour, including waiting, listening to the information and resting.
- 7. In case of serious adverse event following the administration of the 1st dose of vaccine, please inform our school and consult the attending doctor or family doctor on the suitability for receiving the 2nd dose of vaccine.
- 8. If you are unable to receive vaccination according to the above schedules, please inform our school immediately for cancellation and make separate arrangements on your own.

Yours sincerely,

Mr. Wong Chung Leung

Principal

Remarks: Please sign the reply slip on or before 30/06/2021 (Wednesday).



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REPLY SLIP

Date:			
To whom it may concern,			
I acknowledge the matt		School Special Notice (2020/2021) N	Io. 13 and will comply
	Signature	e of Parent/Guardian:	
	Name of	Parent/Guardian:	
	Class:	Name of Student:	No: