

## 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. 18 COVID-19 Vaccination Programme 2<sup>nd</sup> Dose Vaccination Arrangement (S.1, S.2, S.4S)

15th July, 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/place at School
2 <sup>nd</sup> Dose	21/07/2021(Wednesday) 2:30 p.m.	1:30 p.m. Dancing Room

Please read and note the following:

- 1. Please consult your family doctor on the suitability for vaccination, if necessary.
- 2. You must bring COVID 19 Vaccination Record.
- 3. You must 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 1<sup>st</sup> dose of vaccine, please inform our school and consult the attending doctor or family doctor on the suitability for receiving the 2<sup>nd</sup> 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 21/07/2021 (Wednesday).



Class Number:

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### **REPLY SLIP**

# $\begin{array}{c} COVID\text{-}19\ Vaccination\ Programme-2^{nd}\ Dose\ Vaccination\ Arrangement} \\ for\ School\ Students \end{array}$

		, 2021	
Ν	My child/ward	will	
		CVC) for vaccination at the time stated in the Notice, and I	
	will go to the CVC with my child/w school bus.	vard by school bus, and will go back to school together by	
	will go to the CVC with my child/ward by school bus, but I will <u>not</u> go back to school with my child/ward by school bus.		
	will not go to the CVC. My child/v take school bus to go back to school	ward will go to the CVC with teachers by school bus, and l.	
	will accompany my child/ward to go to the CVC <u>directly</u> at the time as stated in the <b>Notice</b> , then I will accompany my child/ward to leave CVC ourselves.		
(Pleas	e put a tick "\square" in the appropriate b	ox)	
And, l	I myself		
	will receive vaccination at the same time slots as my child/ward and the Consent Form is attached. *		
	will not receive vaccination at the s	ame timeslot.	
(Pleas	ee put a tick "\square" in the appropriate b	ox)	
*Pleas	se download the Consent Form if ne	cessary.	
(http:	s://www.edb.gov.hk/attachment/en/sch-adm	in/admin/about-sch/diseases-prevention/Annex%202.pdf)	
	Parent/Guardian's Signature:		
	Parent/Guardian Name:		
	Student Name:		
	Class:		