



余振強紀念第二中學

**Yu Chun Keung Memorial College No.2**

香港薄扶林置富徑一號

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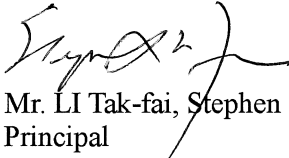
E-mail: [office@yck2.edu.hk](mailto:office@yck2.edu.hk)10<sup>th</sup> April 2024**“Thy Kingdom Come”: Field Trip of Hong Kong’s Religious Culture**

Dear Parents,

To enhance our Form 4 students' understanding of Hong Kong's Christianity culture, subject groups of Citizenship and Social Development (CSD), Chinese History (CHS) and Religious Studies (RS) will jointly organise “Thy Kingdom Come: Field Trip of Hong Kong’s Religious Culture”. It is expected that through the activity, Form 4 students will be able to develop a sense of identification with the local culture and to increase their awareness of their role as citizens of Hong Kong. Details of the programme are as follows:

<b>Date</b>	25 <sup>th</sup> April 2024
<b>Location</b>	Hong Kong Catholic Cathedral of the Immaculate Conception, St John’s Cathedral (Hong Kong Sheng Kung Hui).
<b>Assembly Time and Place</b>	13:30 at School’s Covered Playground
<b>Dismissal Time and Place</b>	Around 16:15 at MTR Central Station
<b>Fees</b>	FREE
<b>Target participants</b>	All F4 Students
<b>Teachers-in-charge</b>	Mr Chan Pui To (CSD and CHS Teacher), Mr Ng Tung Yeung, Ms Annette Hon Yan (RS Teachers)
<b>Remarks</b>	<ul style="list-style-type: none"> <li>- All students are required to wear neat and tidy school uniforms to show their respect for the Christian religion and culture.</li> <li>- This activity aims at facilitating religious dialogue and promoting cross-cultural understanding, where students can learn the importance of respecting different cultures, regardless of their own religious beliefs.</li> </ul>

Yours faithfully,



Mr. LI Tak-fai, Stephen  
Principal

RENEW ENLIGHTEN SUCCEED

**Reply Slip**

Date: \_\_\_\_\_

To: Principal of Yu Chun Keung Memorial College No.2

I have read the School Circular No. 112 and acknowledge the arrangements concerning the Field Trip.

I \*agree / disagree my son/daughter to attend the activities on time. (\*please delete as appropriate)

Student’s Name: \_\_\_\_\_

Class: \_\_\_\_\_ ( )

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

Emergency contact No.: \_\_\_\_\_

Student’s contact No.: \_\_\_\_\_