國民學校 KWOK MAN SCHOOL

Phone: 29810432 Fax: 29816345



Address: 30 Kwok Man Road, Cheung Chau

28th November, 2025

Parent-Child Dragon's Beard Candy Workshop

Dear Parents,

To enhance students' understanding of traditional Chinese culture, our school will host a Parent-Child Dragon's Beard Candy Workshop on the first term's Parents' Day.

This activity is designed to allow parents and children to create a traditional Chinese snack together, thereby promoting the parent-child relationship and fostering a deeper appreciation for the relevant Chinese cultural background. The details are as follows:

Activity Details:	The workshop will commence with an introduction to the history and cultural significance of Dragon's Beard Candy. Following this, a professional instructor will provide a demonstration and direct guidance to parents and children as they collaboratively prepare the Dragon's Beard Candy.	
Date:	13 th December,2025 (Saturday)	
Time:	 Session One: 9:15 a.m 10:15 a.m. Session Two: 10:30 a.m 11:30 a.m. Session Three: 11:45 a.m 12:45 p.m. Note: Parents may select the session they wish to attend based on their preference. 	
Venue:	Activity Room	
Fee:	Free	
Quota	Each session is limited to 25 parent-child groups, with each group consisting of one parent accompanying their child. (Should the number of applications exceed the quota, selection will be determined by lucky draw.)	
Remarks:	 Each group will collaboratively produce one box of Dragon's Beard Candy. The ingredients may contain nuts and peanuts. 	

We sincerely hope that parents and your children will join us for this event. Please kindly complete and return the reply slip by 5th December,2025 for necessary arrangements. The results will be announced on 10th Decembe,2025. For any inquiries, please feel free to contact Ms. Chan at 29810432.



Mr. Lo Wan Kai (Supervisor)

Ms. Kwok Yuen Ki (Principal)

Circular No.132E/25

Parent-Child Dragon's Beard Candy Workshop

I agree / disagree to participate in the Parent-Child Dragon's Beard Candy Workshop with my child.

* Please delete as appropriate.

If I agree, the session I select is:

Session One: $\square 9:15-10:15$ $\square 10:30-11:30$ $\square 11:45-12:45$

Session Two: □ 9:15-10:15 □ 10:30-11:30 □ 11:45-12:45

Session Three : □ 9:15-10:15 □ 10:30-11:30 □ 11:45-12:45

Name of Student:	Class :	()
Parent's signature :	Date:	
Phone no		