

**Coral Primary School**

Register  
number

**Parental Reply/Acknowledgement Form**  
(To be submitted to Form Teacher by Monday, 6 August 2018)

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

**Please tick (✓) the appropriate boxes and delete accordingly.**

**For all parents**

I have read and acknowledged the content in August Coral Waves.

**For P2 to P5 parents**

I \*will / will not be attending the **HeArts Shine Fiesta @ White Sands Primary School**.  
Number of parents/guardians attending – \*1 adult / 2 adults

**For P6 parents only**

I \*allow / disallow my child/ward to attend the **P6 September Vacation Supplementary Lessons** and will ensure that my child/ward is punctual.

**Reason for disallowing:**

\_\_\_\_\_  
Name of Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's /Guardian's Signature

\_\_\_\_\_  
Contact Number