

元朗東莞同鄉會王少強夫人幼稚園

接種疫苗通告

敬啟者：

為加強 貴子弟預防 2019 新冠病毒病，現安排專業醫生到本幼稚園接種科興疫苗(第三針)，詳情如下：

接種日期：2022 年 10 月 28 日(星期五)

地點：本幼稚園

時間：上午 10 時

當天家長或監護人(只 1 位)陪同子女到校打針，請帶備子女正確香港證件(正本)，並必須使用「安心出行」，進校後排隊等候。

請填妥回條於十月十八日(星期二)或之前交回校。如需接種第一針或第二針，請與校務處聯絡。

此致

貴家長

校長 鄭家鳳 啟

二零二二年十月十三日

備註：依照教育局《預防 2019 冠狀病毒病學校健康指引》，全日班下午留校照顧之學生，於 11 月 1 日開始必須接種 3 針疫苗，或已接種 2 針及曾確診。

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接種疫苗回條

敬覆者：

本人是_____班_____的家長，本人明白有關接種科興疫苗之內容和注射後可能引起的反應。

同意敝子弟接種科興疫苗(第 1 針，第 2 針，第 3 針)

不同意敝子弟接種科興疫苗

(請以表示)

此覆

元朗東莞同鄉會

王少強夫人幼稚園

家長簽署：_____

二零二二年十月_____日

YUEN LONG TUNG KOON DISTRICT ASSOCIATION
MRS.WONG SIU KEUNG KINDERGARTEN

No:221014
13th October, 2022

Dear Parents,

COVID-19 Vaccination - Sinovac

To strengthen the children's protection on preventing the Coronavirus disease, we arrange the professional doctors to inoculate the inactivated vaccine – Sinovac (3rd dose) in our kindergarten. Details are shown as follows :

Date of Vaccination: 28th October, 2022 (Friday)
Venue : Injection in campus
Time : 10 a.m.

Parents or guardians (only 1 person) is allowed to accompany their children to the school for injections on the day. Please bring the Original Hong Kong Identity documents for the children, and scan "LeaveHomeSafe", also queue for waiting after entering the school.

Please complete the reply slip and return it to the school on or before 18th October (Tuesday). For the first or second dose, please contact the school office.

Yours faithfully,

Cheng Ka Fung

Principal

Remarks: According to the Education Bureau's "Health Protection Measures for School", students who stay in school in the afternoon for full-time classes must be vaccinated for 3 doses from 1st November, 2022, or have received 2 doses and have been diagnosed.

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Reply Slip

Inactivated Vaccine (Vero Cell) (Sinovac)

Student Name: _____ Class: _____

I have read and understood the content of COVID-19 Vaccination (Sinovac) and possible response after injection,

- I agree my child to get vaccination of Sinovac (1st dose; 2nd dose; 3rd dose)
- I don't agree my child to get vaccination of Sinovac.

Parents signed: _____

Date : _____