



Republic of the Philippines
Department of Education
NATIONAL CAPITAL REGION

May 14, 2025

REGIONAL MEMORANDUM

No. 434, s. 2025

To: Schools Division Superintendents
SGOD Chiefs & CID Chiefs
RO Division Chiefs, Section and Unit Heads
Public and Private Elementary and Secondary School Heads
All Others Concerned

ADDENDUM / CORRIGENDUM TO REGIONAL MEMORANDUM NO. 385, S. 2025 (DEPED NCR REGIONAL ATHLETIC ASSOCIATION (DEPED NCR RAA) 2025 PALARONG PAMBANSA DELEGATION)

1. In connection with Regional Memorandum No. 385, s. 2025 titled *DepEd NCR Regional Athletic Association DepEd NCR RAA 2025 Palarong Pambansa Delegation*, the Schools Divisions are hereby informed of the following:

1.1. Addendum: Palarong Pambansa Entertainment

1. Aldrin A. Arienza	Teacher	Taguig-Pateros
2. Ronald O. Polvoriza	Teacher	Taguig-Pateros
3. Felice Ann Margarette M. Clapis	Teacher	Taguig-Pateros
4. Ladyme Q. Bantilan	Teacher	Taguig-Pateros
5. Michael M. Rubio	Teacher	Taguig-Pateros
6. Julius G. Guerrero	Teacher	Taguig-Pateros
7. Gilbert Cuasay	Teacher	Taguig-Pateros
8. Musika Emmanuel C. Cuasay	Teacher	Taguig-Pateros
9. Glenn Madriaga	Teacher	Taguig-Pateros
10. Erik Jims H. Bongon	Teacher	Taguig-Pateros

1.2. Addendum: Technical Secretariat, Screening & Evaluation

1. Rafael Felices	Teacher- RSAC (Paragames)	Navotas
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1.3. Corrigendum: Documentation, News & Editorial Board

Name	Replacement	School/SDO
1. Justin Jacob B. Rosario	Charles William S. Balangue	MPNAG - Mandaluyong City
2. Frances Atasha V. Castillo	John Benedict D. Tolentino	HHIS - Mandaluyong City



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1.4. Corrigendum: Procurement, Uniforms & Supplies Committee

Name	Replacement	Division
Isabel Caburnay	Noel Panerio	RO -ASD
Edison Narido	Not joining	RO-ORD

1.5. Corrigendum: Security, Safety & Discipline Committee

Name	Replacement	Division
Bayani Litusquen	Pasay Food Committee	Pasay
Eduardo L. Kondo	Noel C. Delos Reyes	Caloocan

2. Food and accommodation of the additional members of the Regional Technical Working Committees will be at the billeting school. CID and SGOD Chiefs are encouraged to attend and join the parade during the 2025 Palarong Pambansa Opening Ceremonies. Travel expenses shall be charged to SDO funds subject to the usual accounting and auditing rules and regulations.

3. The SDO Ilocos Norte will provide bed rolls for the delegation while the pillows and blankets may be provided by the Division Offices. Provision of mosquito net is optional.

4. In view of the change of schedule of departure of the NCR Delegation from Laoag City and return to Manila on **June 3, 2025 at 7:00 AM** instead of June 1, 2025, the new drop-off point will be at the **Quezon City Memorial Circle**. The pick-up point on May 20, 2025 at 3:00 AM remains at the Misamis St., Bago Bantay Quezon City.

5. Expenses related to the 2025 Palarong Pambansa shall be charged to Palaro funds, local funds or SEF as the case maybe subject to the usual accounting and auditing rules and regulations.

6. Enclosed are pertinent documents, for reference.

6.1. Annex A – Parent's/Guardian's Consent Form (Student Writers)

6.2. Annex B – Request to Pull-Out Student Athlete from Billeting School and Waiver of Accountability Form

7. For strict compliance and immediate dissemination.

JOCELYN DR ANDAYA

Regional Director, NCR

Concurrent Officer-In-Charge, Office of the
Assistant Secretary for Operations

Encl.: As stated



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PARENT'S/GUARDIAN'S CONSENT FORM

Participation of Student Writers in the 2025 Palarong Pambansa

To whom it may concern:

I, _____ the undersigned, am the parent/legal guardian of
_____, a bona fide student of _____, who has
(Student Writer's Name) (Name of School)

been selected to participate as a *Student Writer* in the **2025 Palarong Pambansa** to be held on **May 20 – June 3, 2025, at Laoag City, Ilocos Norte**.

I hereby give my full consent for my child/ward to:

- Join and take part in the official activities, coverage assignments, and documentation responsibilities during the said event;
- Travel to and from the event venue under the supervision of designated school and DepEd personnel;
- Participate in interviews, write-ups, photo coverage, and other forms of media production related to the event.

I understand that the organizers will take necessary precautions to ensure the safety and well-being of my child/ward throughout the duration of the event. I also acknowledge that the Department of Education, along with its authorized representatives, will not be held liable for any untoward incident that may occur beyond their control.

Should any emergency arise, I authorize the event facilitators and designated personnel to secure appropriate medical treatment for my child/ward.

Student's Name: _____

Grade/Year Level: _____

School: _____

Division: _____

Parent's/Guardian's Name: _____

Relationship to Student: _____

Contact Number: _____

Signature of Parent/Guardian: _____

Date: _____



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**REQUEST TO PULL-OUT STUDENT ATHLETE FROM BILLETING
SCHOOL AND WAIVER OF ACCOUNTABILITY**

I, _____, the undersigned, parent/legal
(Parent's Full Name)
guardian of _____, a participant in the
(Student Athlete's Full Name)
_____, representing DepEd-NCR Athletic Delegation.
(Name of Event)

I would like to formally request the pull-out of my child from the
official billeting area provided by DepEd-NCR, effective _____,
for the following reason(s):

Along with this request, I hereby declare that:

1. I voluntarily assume full responsibility for my child's safety, welfare, and well-being during the entire duration of the event outside the official billeting area.
2. I release and hold free the Department of Education, National Capital Region (DepEd-NCR), including its regional, division, and school officials and staff, from any claims, liabilities, or responsibilities that may arise while my child is under my care and accommodation.
3. I understand that my child will still comply with all event-related rules, schedules, and activities, and any untoward incident resulting from this arrangement shall be solely my responsibility.

Attached is a copy of valid ID for verification purposes.

Signature over Printed Name
Parent/Guardian
Date: _____