

Grades 1, 3, 4 Swimming Program May 2018

Dear Parents,

19th April, 2018

We will once again be offering a swimming program for the above grades from 21st May till 25th May. The children will be taught in small groups by qualified instructors. As with previous years, the children will receive 5 x one hour lessons over five consecutive days.

The following grades will be participating: **106, 107, 108, 109, 315, 316, 317, 318, 422, 423, 424 and 425.** Other grades will be swimming in Term 4 and will receive their notice at a later date.

Dates	Group	Swimming Groups	Lesson Times
May 21st till 25th	1	315, 316, 317	9.30 – 10.30 a.m.
	2	318, 422, 423	10.30 – 11.30 a.m.
	3	424, 425, 108	11.30 a.m. – 12.30 p.m.
	4	106, 107, 109	1.00 – 2.00 p.m.

THE TOTAL COST OF THE PROGRAM IS \$58.00

The school calculates the cost of the program by balancing instructor and bus costs, and the pool entry fee. We have still kept it to an absolute minimum, in order to encourage as many children as possible to participate. As you can appreciate, unless most children attend, the program becomes unmanageable because of the need to supervise children at the pool and at school and because of increasing bus costs. If an overwhelming majority do not participate, we will have to withdraw the program. This would be regrettable as we consider the program as an extremely valuable part of our school curriculum.

Parents are welcome to attend lessons during the program but are required to pay a spectators fee.

We also need parents to travel on the bus with each group, both to and from the pool. Parents are required to have a ***Working with Children's Check*** to participate as a helper. Application forms for WWCC are available at the post office. Assisting with the program may require a time commitment of approximately 2 hours (e.g. *Travel time to the pool from 9.00 - 9.30a.m. - Lesson time 9.30 - 10.30a.m. and travel time back to school 10.30 - 11.00am.*). Please indicate on the parent helper slip if you can assist.

At this stage it is essential that we finalise numbers. Please return the permission form together with payment and parent helper form to the mailbox outside the office by Friday 11th May so we can organise times, groups and helpers.

If your child is not participating in the program please indicate on the form and return it to school.



Trish Enzinger
Principal

Justin Harriss
PE Teacher

Swimming Program – 2018 Permission Form



Child's Name: _____ Grade: _____

Dates for the swimming programs are:

Monday 21st May to Friday 25th May
106, 107, 108, 109, 315, 316, 317, 318, 422, 423, 424 and 425

- My child **will NOT** be participating in the Swimming Program for 2018.
- My child **WILL** be attending swimming instruction at the Kilsyth Centenary Pool and I have enclosed **\$58.00 (per child)** Payment by Cash / QKR (date paid / /)
Cheque (please circle).

I authorise the teacher in charge of the excursion to consent, where it is impracticable to communicate with me, to my child receiving such medical or surgical treatment as may be deemed necessary.

Signature: _____
Parent/Guardian

**Please return this completed form together with payment to your teacher
by Friday 11th May, 2018**

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Swimming Parent Helper –Bus Travel

Child's Name: _____ Grade: _____

I am available to travel on the bus for the swimming program. I understand I will be needed for 2 hours ($\frac{1}{2}$ hour each side of lesson).

Parent's Name: _____ Telephone No. _____

Dates available (please specify – Bus / Self Drive / Specific Dates)

- I hold a current Working with Children's Check and have / will produce it at the school office.



Please return this section to your teacher by Friday 11th May 2018

Intensive Swimming Program Asthmatics

To be completed by parents of children who are asthmatics.



Child's Name: _____

(Please tick appropriate box)

1. Will medication be required? YES NO
(If YES complete the following)
2. Will medication be required? Occasionally Daily
3. Will medication be taken Before During After
swimming?
4. Who will be responsible for medication? Teacher Child

To assist teachers, parents should supply such inhalations, tablets and syrups in a container on which is clearly stated the name of the child, the dosage, and times the medication is to be given. The name of the medication should be clearly marked on the container.

5. My doctor has no objection to my child participating in the Intensive Swimming Program.

Parent/Guardian