



SPRINGFIELD PRIMARY SCHOOL

An Independent Public School
Working Together, Achieving More

31 Bridgewater Drive Kallaroo WA
6025

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IN-TERM SWIMMING 2018 YEAR P TO 5

August 2018

Dear Parents/ Guardians,

In-term swimming classes will be held at Craigie Leisure Centre, next term in weeks 3 & 4. There will be ten 40-minute lessons in the program. These lessons will be in four groups between 9:00am and 12.30pm.

Classes commence on **Monday 22nd October** and conclude on **Friday November 2nd**.

What to Bring: Children usually wear their swimming attire under school clothes prior to their lesson. They carry underclothes and towel in a small bag on which their name is clearly marked, in order that they may change and return to school dry, at the conclusion of their lesson. Please note that aerosol spray deodorants are not allowed. Swimming teachers recommend the use of goggles.

Swimming Stages: Children who have had 4 successive lessons on the same stage or level will receive individualised coaching. If your child qualifies for this, please mark on the enclosed form under the stages - 4 times at this level. A copy of their last swimming certificate is also helpful.

Cost: The cost will be **\$50.00** per student. This includes \$2.90 per lesson pool entry.

(It is important to note that Swimming and Water safety is part of the Physical Education Program. All children need to learn to swim and maintain their skills in swimming.)

Medical Certificates: "If a child has been observed or is otherwise known to be subject to any form of medical condition involving periodic loss of consciousness (e.g. epilepsy, fainting, diabetes) the child should not be permitted to swim unless a medical certificate is produced by the child's parents stating that it is safe to do so".

Our Year 6 students will not be participating in this program. They will be involved in beach swimming lessons in term 4 during weeks 7 and 8.

Please return the attached forms, as soon as possible to your child's class teacher. Payment for lessons is required as soon as possible with the closing date being **Tuesday 16th October**, as we need to provide final numbers to the Swimming Teachers and Bus Company.

Kind Regards
Mr Sweet



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CONSENT

I am aware that any cost incurred as a result of ambulance callout and/or accident or illness is my responsibility. I am also aware school staff are not responsible for any loss or damage to my child's personal property that may occur during the course of the excursion.

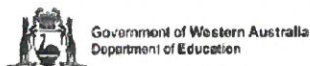
I agree to inform the organisers before the scheduled excursion departure of any change to my child's health and fitness so that appropriate supervision may be arranged. I acknowledge that, should it be considered necessary, school staff will arrange to present my child for medical assessment.

I give permission for my child _____ Area _____

to attend **Swimming lessons** on **Monday 22nd October to Friday 2nd November**
I understand that he/she will travel will travel by bus to and from the Craigie Leisure Centre.

Parent / Guardian Name _____

Signature _____



Interm Swimming ENROLMENT FORM

TO BE COMPLETED BY PARENT:

I give my child _____ Age: _____ School: _____
(Full Name PRINT BLOCK LETTERS)

Room Number: _____ permission to attend the Department of Education's Interm Swimming classes at _____

commencing on ____/____/____ and enclose payment of \$ _____. (Lessons for Government schools are free. Payment is for transport and pool entry)

Is your child subject to asthma, seizures, fainting, epilepsy, diabetes, allergies or any other condition or disability* that may affect his/her safety, or require the school to provide learning adjustment? No Yes (please provide further information if necessary) **

*Swimming staff cannot take responsibility for medical conditions or diagnosed disabilities that are not listed on the returned form.

**If necessary please consult your Principal well in advance of lessons to discuss appropriate learning adjustments.

Please list and provide details of medication currently being taken if applicable:

I agree to inform the organisers before the scheduled departure of any change to my child's health and fitness. Where it is not practical to communicate with me, I authorise the school staff to consent to my child receiving such medical treatment as considered necessary.

Stage No	8	Water/Surf Wise
1	Beginner	9 Senior
2	Water/Surf Discovery	10 Jnr Swim & Survive/Surf Stage 10
3	Preliminary	11 Swim & Survive/Surf Stage 11
4	Water/Surf Introduction	12 Snr Swim & Survive/Surf Stage 12
5	Water/Surf Safe	13 Wade Rescue/Surf Stage 13
6	Junior	14 Accompanied Rescue/Surf Stage 14
7	Intermediate	15 Bronze Star (pool only)

My child is going for Stage number:

Unsure - please grade:

My child has attempted this 'going for' stage three times in Department of Education classes without passing. Please attach copies of last three Department of Education certificates.

Signature: _____ Parent daytime phone number: _____ Date: _____
(Parent/Guardian)