

IN-TERM SWIMMING Years P to 2
TERM 3 2016

In-term swimming lessons will be conducted at the AquaJetty, commencing Wednesday, 20th July (first day in Term 3) and concluding Friday, 29th July. The cost for these lessons is \$33.

Please complete the attached **IN-TERM SWIMMING ENROLMENT FORM** below and return with the **\$33** to the office by Friday, 1st July. **Cash, cheque or EFTPOS payments are to be made at the office using the yellow envelope system; not to class teachers.** If payment by this date causes financial difficulty, please contact the office on 9524 5000 to arrange and sign a payment plan.

Please make cheques payable to Endeavour Primary School and note **that if a refund is required for a valid reason, only pool entrance can be refunded as the buses are booked in advance.** Season passes for the centre are not valid for school activities, including swimming lessons.

Please ensure that all items of clothing, goggles and towels are clearly named.

Please note there is a section for parents to note any **medical conditions** that need to be brought to the attention of swimming teachers to ensure your child's safety.

Lesson times are as follows:

Session 1	EC1, EC2, EC3 and Pre-Primary students from EC6	LEAVE school at 9.00am for lesson starting at 9.20am
Session 2	Rooms 4, 5, 6 & 12	LEAVE school at 9.45am for lesson starting at 10.05am
Session 3	Rooms 13, 14 & 15	LEAVE school at 10.35am for lesson starting at 10.55am

As swimming is part of the schools' Physical Education programme, all children are expected to participate. **Parents MUST inform the school IN WRITING if they DO NOT wish their children to attend these classes.** Thank you.

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IN-TERM SWIMMING ENROLMENT FORM

TO BE COMPLETED BY PARENT:

I give my child _____ permission to attend In-term Swimming classes at
(Full name in BLOCK LETTERS)
the **AquaJetty** commencing on **Wednesday, 20th July (first day back in Term 3)** and enclose payment of **\$33.00**

Is your child subject to asthma, seizures, fainting, epilepsy, diabetes, allergies or **any other condition** that may affect his/her safety?
 No Yes please list and provide details of medication currently being taken if applicable.

Unless such conditions are listed and the form returned, swimming staff can not take responsibility for medical conditions of which they are unaware.

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 teachers to consent to my child receiving such medical treatment as may be considered necessary.

Child's Name: _____ Age: _____ Parent Contact Phone No.: _____
(Day Time)

School: **Endeavour Schools** Room Number: _____

Stage No:	7	Intermediate	
1	Beginner	8	Water/Surf Wise
2	Water/Surf Discovery	9	Senior
3	Preliminary	10	Jnr Swim & Survive
4	Water/Surf Introduction	11	Swim & Survive
5	Water/Surf Safe	12	Snr Swim & Survive
6	Junior	12+	Adv Swim & Survive

My child is going for Stage No:

Unsure, please grade:

My child has attempted this 'going for' stage three times in Department of Education classes without passing.

Signature _____

Date: _____