



WEST LEEDERVILLE
PRIMARY

Dear Parent/Guardian

The Department of Education provides a comprehensive swimming program for all students in Pre-primary through to Year 6. Interm swimming lessons form an important part of the health and physical education component of the West Australian Curriculum. **Year 1-2 students will be swimming during Weeks 7 and 8 of this term.**

Please complete all three attached documents: this permission slip, the Water Based Excursion consent form and the yellow swimming enrolment form.

Please retain this information and return the consent form (opposite) by Monday, 18th November, 2019.

DATE: 25th November to 6th December, 2019

VENUE: Beatty Park Leisure Centre

TIME: Lesson 1: 1:05pm, bus departs at approximately 12:45pm – Year 1 White, 1 Black, 2 White
Lesson 2: 1.55pm, bus departs at approximately 1:35pm -Year 1 Red, 1/2, 2 Blue, 2 Red

COST: \$60.00, includes bus fare and pool entry for 9 days. (Lessons are free)

DRESS: Because the lessons are in the afternoon, most children will need to come to school in their uniform and get changed into bathers at school

BRING: SunSmart- sunscreen and rash vests.
Swimming goggles are permitted, but snorkeling goggles are not suitable.
Please make sure any required medication is given to the class teacher to take.
PLEASE LABEL EVERYTHING

SUPERVISION: Classroom teachers, education assistants and administrators will be attending on various days. Any queries please speak to your class teacher or contact the office.

NOTE:

Staff accompanying students on excursions will take all reasonable care while the students are in their charge to protect them from injury and to control and supervise their behaviour and activities. Parents/guardians should be aware that staff members are not responsible for injuries or damage to property which may occur on an excursion where, in all circumstances, staff have not been negligent. Costs incurred as a result of accident or illness are the responsibility of the parent/ guardian.

Parents are required to inform the organisers well before the scheduled excursion departure of any change to their child's health and fitness so that appropriate supervision may be arranged. Where it is considered necessary, school staff will arrange medical assessment and treatment for students.

Should you have any queries, please do not hesitate to contact me/ the teacher in charge of the excursion on 9381 1655 or via email.

Ms Fiona Kelly
Principal

INTERM SWIMMING YEAR 1-2, PAYMENT METHOD (\$60.00)

Child's name: _____ Teacher: _____

My child will be participating in the Interm Swimming Lessons at Beatty Park Leisure Centre from 25th November to 6th December, 2019.

Please:-

Debit my child's school based account. (PLEASE ENSURE SUFFICIENT FUNDS).

I have paid by Direct Bank Deposit (BSB:036 044 Acct. No:123672
Ref:Student's name) Bank reference no: _____ Date: _____

I enclose \$ _____ (Please bring cash directly to the office. No change will be given. A credit will appear on your statement).

Credit card: Type _____ Card No. _____

Expiry date _____ Amount _____

Signature: _____ Date: _____

(Credit Card payments only accepted where cost exceeds \$20)

YEAR 1-2 INTERM SWIMMING CONSENT FORM 2019

I have read and understood the information regarding the Interm swimming lessons to Beatty Park Leisure Centre from 25th November to 6th December, 2019. and give my consent give my consent for _____ (name) to attend.

Signature of parent/guardian _____ Date _____

RETURN TO YOU'RE THE SCHOOL OFFICE BY Monday 18th November, 2019.