Dear Parents

**PLEASE LABEL ALL UNIFORMS & SWIMMING GEAR**

As part of the Physical Education programme for Shelley PS, all students in Pre Primary to 7 are required to attend In-term Swimming Lessons. Lessons will commence at Cannington Leisureplex on **Monday 19 May 2014** and conclude on **Friday, 30 May 2014**. As swimming lessons are deemed an important part of the school programme all students are encouraged to attend. Only students with a valid medical reason will be excused from participating.

Students can come dressed in their school uniform with their bathers beneath their clothes. A separate labelled/named waterproof bag containing towel, underclothes and thongs needs to be brought to school each day. Thongs can be worn to and from the pool, however, they are not suitable or safe for the entire day. Long hair should be tied back and please do not wear jewellery or bring expensive items to swimming classes.

All students may use an appropriate (tight) ‘T-shirt’ or ‘rash shirt’. Swimming goggles are permitted, but snorkelling goggles are not suitable. Please label all items as the school will not be responsible for any lost items. Children are encouraged to be responsible for their own belongings. Please note that morning recess and lunch times may be altered over the 10 days.

The cost of bus hire and pool entry is **$40.00** for the ten days and this amount should be **paid to your classroom teacher**.

Please complete the enrolment form below and return it to **your classroom teacher**, together with appropriate money, before **THURSDAY 15 MAY 2014** as forms are required by the swimming instructors before swimming lesson commence.

<table>
<thead>
<tr>
<th>Session Times</th>
<th>Rms</th>
<th>12, 7, 4</th>
<th>10:10am</th>
<th>Rms 14, 10, 8</th>
<th>11:10am</th>
<th>Rms 13, 9, 6</th>
<th>11:55am</th>
<th>Rms 17, 11, 5</th>
<th>1:00pm</th>
<th>Rms 3 &amp; 1</th>
<th>1:45pm</th>
<th>Rms 18 &amp; 15</th>
</tr>
</thead>
</table>

Thank you

GILLIAN MURGIA
PRINCIPAL
2 May 2014

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**SWIMMING LESSONS PAYMENT FORM:**

**PAYMENT CHOICE:**  **$40:00**

- [ ] □ **CASH PAYMENT**
  - $_________ Enclosed

- [ ] □ **ACCOUNT PAYMENT**
  - Please deduct from student account

(Only applies if you have made an advanced payment.)

**STUDENT’S NAME:** ____________________________  **ROOM NO. _____**

Signed ___________________________________________ (Parent / Guardian) Date ______________________

S:\ADMINISTRATION\850 Student Management\854 Camps Excursions Etc\854.2 Excursion & Incursion Forms\2014\In Term Swimming.DOC
INTERM SWIMMING ENROLMENT FORM

TO BE COMPLETED BY PARENT:

I give my child ___________________________ Age: ______
Room Number ______ permission to attend the Department of Education’s In-term Swimming classes at Cannington Leisureplex commencing on 19 May 2014.

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 (If ‘yes’ please provide further information if necessary).**

*NB: Swimming staff cannot take responsibility for medical conditions or diagnosed disabilities that are not listed on the returned form.
**NB: 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 may be considered necessary.

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. Please attach copies of last three Department of Education certificates. □

<table>
<thead>
<tr>
<th>Stage Nos:</th>
<th>7. Intermediate</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Water/Surf Discovery</td>
<td>9. Senior</td>
</tr>
<tr>
<td>6. Junior</td>
<td>12+ Adv Swim &amp; Survive</td>
</tr>
</tbody>
</table>

Signed: __________________________ Parent Daytime Contact Phone Number: ________________

(Parent/Guardian)

Date: ________________