

Learning and Growing Together

Friday, 06 January 2017

Dear Parents/Carers,

Year 5 Swimming

Swimming will start for Year 5 pupils on **Friday 17th February**. This is the week **before** half term.

Swimming kit is a plain one piece swimsuit for girls and dark lycra/skin tight shorts for boys. Loose fitting shorts are not permitted. Pupils will need to bring a towel. No jewellery or nail varnish may be worn in the pool.

Children who have asthma must bring their inhaler with them to the pool.

Swimming lessons will take place every Friday morning. Leopard's class have the first session and will leave school at **8:50** so children will need to arrive at school promptly.

Please find attached a permission slip which must be completed and returned in order for your child to take part in swimming lessons. This must be returned by **Friday 27th January 2017**.

In addition to swimming, both Year 5 classes will have one PE session each week which will be on **Thursdays**. Please ensure children have correct PE kit, which is a plain white t-shirt, navy or black shorts and pumps or trainers. A tracksuit may only be worn for outdoor PE in cold weather.

Please don't hesitate to contact us if you have any queries.

Thank you for your continued support,

Mrs Davis, Mrs Marsden, Mrs Howe and Mrs Kneissl



LEARN TO SWIM – PARENTAL CONSENT FORM

Name: School:

Date of Birth: Class:

Address:

.....

..... Tel. No.

As part of your child’s education he/she will be undertaking swimming lessons this year. It is important that the swimming teacher has the following information concerning your child:

	Yes	No
<ul style="list-style-type: none"> Does your child suffer from any of the following: Asthma (please bring inhaler to every swimming session) Epilepsy Sensory impairment e.g. deaf Grommets (recommend wearing a swimming cap & ear plugs) Diabetes 		
<ul style="list-style-type: none"> Does your child take medication on a regular basis? Give details: 		
<ul style="list-style-type: none"> Does your child have any other medical conditions? Give details: 		
<ul style="list-style-type: none"> Please give details of any past or present injuries e.g. Fractures 		

Swimming Ability:

Non-swimmer	5m	10m	25m	50m+	Any other awards (please specify):

Chemicals in the water in swimming pools adversely affect my child’s eyes. I give my permission for my child to wear goggles during swimming lessons I have taught my child how to remove goggles safely. I give my permission for my child to wear goggles during swimming lessons.

I am aware that my child will not be allowed to wear goggles for ‘fun’ or ‘diving’ activities for safety reasons and that the instructor will ask my child to remove their goggles if they are misused.

Signature of Parent/Guardian Date

**Please note your child will not be allowed to swim unless this form is completed.
Please return this form to your child’s school.**