



Principal - Craig Allibon

10 February 2023

Dear Parents and Carers

## Sporting Schools Program - Swimming for Sport

This year senior students will participate in swimming for sport as part of the Sporting Schools Program. Teachers will be concentrating on building water confidence and stroke correction. Instruction will take place at Culcairn Swimming Pool under the supervision of teachers and qualified instructors. All children in Years 4 to 6 will participate. Swimming for Sport will be conducted from 2:00pm – 3:00pm on the following days:

### Class 5-6

Tuesday 14 February  
Tuesday 21 February  
Tuesday 28 February  
Tuesday 7 March

### Class 4-5 Plus Year 4 from 3-4

Thursday 16 February  
Thursday 23 February  
Thursday 2 March  
Thursday 9 March

Entry to the pool will be subsidised by the Sporting Schools Program, which will mean the entry fee is reduced to \$0.50 per student per day. On designated swimming days students will leave school at 1:45pm and return by 3:15pm.

Each student should bring in a plastic bag or swim bag: swimming costume, towel, sunscreen (preferably water resistant), t-shirt or rash shirt and a **hat**. All items should be **clearly labelled with the student's name**. In accordance with our Sun Safe Policy and the time of instruction, all children must wear a hat when walking to and from the pool. "NO HAT - NO GO" and wear a t-shirt or rash shirt.

Please complete the permission note to enable your child to participate. Please be aware that due to safety concerns, students who fail to follow instruction at the pool will be removed from the water and returned to school.

Regards

Craig Allibon  
PRINCIPAL

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### Swimming for Sport PERMISSION NOTE

I hereby give permission for my child \_\_\_\_\_ to participate in Swimming for Sport which will be conducted at the Culcairn Swimming Pool.

Please find enclosed \$2.00 being the total cost of pool entry for my child for 4 weeks.

In the event of injury or illness, I authorise supervisors to seek any medical attention my child may require.

Is there any information i.e. allergies, asthma that you feel the supervisor should know about your child:

\_\_\_\_\_

Signed: \_\_\_\_\_

Date: \_\_\_\_\_