



"...Let us remember that, as many hands build a house, so many hearts make a school."

ST. PAUL'S CHURCH OF ENGLAND PRIMARY SCHOOL

4th September 2019

Dear Parents/Carers

Swimming for Children in Key Stage 2

As per our previous letter before the summer break dated 16th July 2019, we have made arrangements for all Key Stage 2 students to have 5 x 1hr swimming sessions at White Oak Leisure Centre in Swanley. The first session will be on **Wednesday 11th September 2019** and the last session will be on **Wednesday 9th October 2019**. The cost of the sessions will be **£40.00** per child, which covers the hire of the pool, the instructors and transport to and from the Centre. **Payment should be made via our School Gateway platform.**

Please can you complete the attached consent tear off slip and return it to the school office no later than **Monday 9th September**.

Please ensure your child brings the following items in a suitable bag (no shampoo or hair gel please):

Boys – swimming trunks (bermuda style shorts or cycling shorts are NOT appropriate) and a towel. A swimming hat is required unless you have very short hair!

Girls – one piece swimming costume (girls in two pieces will not be allowed to swim), towel and a swimming hat. Goggles are recommended but are not essential.

If your child has any medical conditions that may affect his/her ability to participate, please let us know as soon as possible. If your child needs to miss one of their swimming lessons please let the office know as soon as possible. Can you please complete the attached Swimming Ability Form and return it to the school office.

Yours faithfully

Mr Ben Hulme
Headteacher

St. Paul's Church of England Primary School

I agree to (name of pupil) taking part in the five swimming sessions at **White Oak Leisure Centre commencing 11th September until 9th October 2019**. The sessions will be overseen by qualified instructors and at least two members of St. Paul's staff.

I am satisfied that he/she is in good health and that his/her health is adequate to cope with the activity.

Parent/Carer signature Date

Swimming Ability Form

Name of child _____

Class _____

My child is able to swim _____ metres

My child is unable to swim _____

My child needs to be able to touch the bottom _____

My child is a confident swimmer _____

Any other information:

Any medical conditions: