



## INTERM SWIMMING 2020

### Monday 30 March – Thursday 9 April

PLEASE CUT OUT AND RETURN BOTTOM FORM & ATTACHED CONSENT FORM WITH YOUR PAYMENT

Dear Parent/Carers

As you know the children in Pre Primary to Year 6 are going swimming for nine days from Monday 30 March 2020.

**For your child to be able to attend, we need the swimming enrolment form below, the attached consent form and all monies returned by no later than Monday 23 March for classes to be organised at the pool.**

**The total cost is \$40.00** - (Bus and Oasis Pool Entry for 9 days)

Students are to wear their uniform to school and will get changed into their bathers at school. It is preferred that the children arrive at the swimming centre ready to swim. The children's clothes are left at school and they get changed when they return.

**For swimming the children will need to bring:**

- Bathers
- Towel
- **Plastic bag – (labelled with the child's name – for wet items and shoes)**
- Sandals or thongs (as the ground can get hot) – preferably thongs
- Swimming goggles if required
- T-shirts or rash shirts are permitted (only if necessary).



**PLEASE ENSURE ALL ITEMS ARE MARKED WITH YOUR CHILD'S NAME.**

**PLEASE RETURN**

**INTERM SWIMMING ENROLMENT FORM**

**TO BE COMPLETED BY PARENT:**



Department of Education

I give my child \_\_\_\_\_ Age: \_\_\_\_\_ School: **Belmay Primary School**  
(Full Name PRINT BLOCK LETTERS)

permission to attend interm swimming classes at Belmont Oasis commencing on Monday 30 March and enclose payment of \$40.00.

Is your child subject to asthma, seizures, fainting, epilepsy, diabetes, allergies or any other condition or disability\* that may affect his/her safety? No  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 teachers to consent to my child receiving such medical treatment as may be considered necessary.

Stage No.

- |                           |                        |
|---------------------------|------------------------|
| 1 Beginner                | 8 Water/Surf Wise      |
| 2 Water/Surf Discovery    | 9 Senior               |
| 3 Preliminary             | 10 Jnr Swim & Survive  |
| 4 Water/Surf Introduction | 11 Swim & Survive      |
| 5 Water/Surf Safe         | 12 Snr Swim & Survive  |
| 6 Junior                  | 12+ Adv Swim & Survive |
| 7 Intermediate            |                        |

**My child is going for Stage No.**

**Unsure, please grade**

My child has attempted this stage three times in Dept of Education classes without passing. Please attach copies of last three Dept of Education certificates

Signature \_\_\_\_\_ Daytime Contact Number: \_\_\_\_\_ Date: \_\_\_\_\_  
Parent/Guardian

## PARENT/GUARDIAN CONSENT FORM

### CONSENT FORM FOR **INTERM SWIMMING LESSONS** 2020

TO BE RETURNED SIGNED TO THE SCHOOL BY **MONDAY 23 MARCH 2020**

CONTACT INFORMATION FOR: \_\_\_\_\_  
(STUDENT'S NAME) (ROOM NO.)

\*I have paid for the excursion by:

Cash                       Eftpos

Contact Name: _____		
☎ Home: _____	☎ Work: _____	☎ Mobile: _____
Other: _____		
<p>I have read and understood the attached information. Where it is not practical to communicate with me, I authorise the teacher-in-charge of the excursion to consent to my child receiving such medical treatment as may be considered necessary. I am aware that the Education Department insurance does not cover personal accidents through misadventure nor loss or damage of personal belongings.</p> <p>I give consent for my child _____ to attend interm swimming lessons at Belmont Oasis Swimming Complex from Monday 30 March to Thursday 9 April 2020.</p>		
Signature of parent/guardian _____		Date _____

\*The following details have changed from those recorded on my child's medical information form.

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