



CONNOLLY PRIMARY SCHOOL

Fairway Circle, Connolly WA 6027

Phone: 6206 3200

Email: connolly.ps@education.wa.edu.au

Website: www.connollyps.wa.edu.au

YEAR 3 SWIMMING LESSONS

Dear Parents,

A series of **9 swimming lessons** for children of in Year 3 will be held at HBF Arena Joondalup commencing on the Tuesday 27th April, 2021 and concluding on Friday 7th May 2021.

Details are as follows:

Venue: HBF Arena Joondalup

Dates: **Tuesday 27th April, 2021 – Friday 7th May, 2021.**

Lesson Times: **1.20pm – 2.00pm**

(Students will depart school approx. 20 min. before their lesson and return approx. 35 min. after their lesson)

Travel: Westside Bus Charter

Cost: **\$33.00** for the series of **9** lessons. This payment is for bus fare to/ from the venue and daily entry to the pool.

Payment due by Tuesday 20th April 2021.

Children will travel to the pool in bathers and will require their towel and change of clothing in a plastic bag. Shoes/socks will be left at school under desks as a means of saving time and reducing lost property problems. Thongs or slip-ons **MUST** be worn to and from the pool for safety reasons. Parent spectators are welcome to attend and are required to pay **\$2.60** pool entry.

Swimming lessons are considered to be part of the normal school programme available to our school and **all children are expected to participate**. Any student unable to participate will complete a normal programme of schoolwork under the supervision of a teacher.

This excursion has been uploaded on Qkr, ready for digital permission and payment to be finalised. Preferred permission and payment at Connolly Primary School is through the Qkr app.

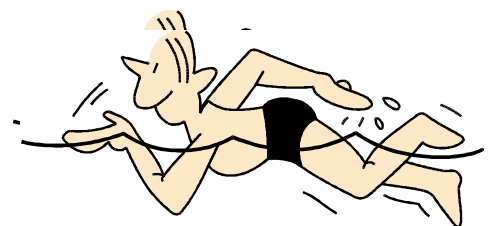
Please note the school no longer encourages cash payments.

Please note that if permission is done through the Qkr app the school also requires the Dept of Education Enrolment form to be returned.

Alternatively, please return BOTH the completed forms below and provide payment by EFTPOS or online transfer to Connolly Primary School, BSB: 066-040, Account: 199 03645, Ref: child's surname, first name and reason.

Yours faithfully

Chantelle Cochrane
Associate Principal



BOTH FORMS MUST BE COMPLETED AND RETURNED TO THE SCHOOL



Government of Western Australia
Department of Education

Interm Swimming ENROLMENT FORM

TO BE COMPLETED BY PARENT:

I give my child _____ Age: _____ School: _____
(Full Name PRINT BLOCK LETTERS)

Room Number: _____ permission to attend the Department of Education's Interm Swimming classes at _____
commencing on ____/____/____ and enclose payment of \$ _____.

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 (please provide further information if necessary) **

*NB: Swimming staff can not 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 considered necessary.

Stage No:	7	Intermediate
1	Beginner	8 Water/SurfWise
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

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.

Signature _____ Parent Daytime Contact Phone Number: _____ Date: _____
(Parent/Guardian)

Interm Swimming Enrolment Form V1, May 15

YEAR 3 SWIMMING LESSONS

**To be returned to the office with necessary payment of \$33.00 by Tuesday 20th April 2021.
Please note the school no longer encourages cash payments.**

Paid online

Eftpos

Qkr

Unallocated Credit



Child's Name:		Room No:
Home:	Work:	Mobile:
Other Contact Information:		
I have read and understood the information regarding the excursion and give my consent for my child to attend.		
Signature of parent/guardian:		Date:

Please note: If any medical details for your child have changed, please contact the office so that records can be updated.

NOTE – Photographs of this activity may be used on our website (incl. first name) or in print media (Full name). If you are unhappy with this arrangement regarding your child/ children, please advise the class teacher prior to the outing.