2 February 2017

Dear Parents & Caregivers,

This term, all students in Year 1-6 will be participating in the **Aquatic Education Swimming Program** by the YMCA Whittlesea at Leisure City, 41-53 Miller St, Epping. This program is part of the Health and Physical Education Curriculum. Learning to swim and the skills of water confidence are essential skills for all children especially in an environment where water, swimming pools and beach visits feature prominently in our lifestyles. The cost of the program is included in your school levy.

The program starts next **Friday 10 February** and consists of eight lessons of 60 minutes duration. The dates and times of the lessons are:

**Dates:** FRIDAY- February 10, 17, 24, March 3, 10, Thursday 16, 17 and 24.

<table>
<thead>
<tr>
<th>Homegroup</th>
<th>Lesson Start Time</th>
<th>Lesson Finish Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wheat, Barley, Corn</td>
<td>9.45am</td>
<td>10.45am</td>
</tr>
<tr>
<td>Dairy, Jacaranda, Corn</td>
<td>10.45am</td>
<td>11.45am</td>
</tr>
<tr>
<td>Eucalyptus, Orchard, Corn</td>
<td>11.45am</td>
<td>12.45pm</td>
</tr>
<tr>
<td>Peppercom, Paddock, Canola</td>
<td>12.45pm</td>
<td>1.45pm</td>
</tr>
<tr>
<td>Redding, Creed, Canola</td>
<td>1.45pm</td>
<td>2.45pm</td>
</tr>
</tbody>
</table>

*Corn and Canola parents and students will be notified next week of their specific swimming time.*

On **Friday March 24** for the last session students need to bring an old t-shirt and pair of shorts to wear in the water to practise water safety.

It is the centre’s policy that children with long hair must wear a swimming cap or have their hair tied back. The children need to bring a towel, underwear and wear their bathers underneath their uniform. All items of clothing must be named.

Students will travel by bus with seat belts to and from the pool. Parent helpers are required to meet us at the pool to assist in the change rooms.

**Please complete the attached swimming permission form and return to school by MONDAY 6 FEBRUARY 2017.**

Yours sincerely

Geraldine Dalton
Principal
gdalton@smcmeppingnth.catholic.edu.au

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**SMCM SWIMMING NOTIFICATION FORM – 2017**

STUDENT NAME: __________________________________________ HOME GROUP: ____________________

SWIMMING EXPERIENCE: Experienced [ ] Reasonable [ ] Inexperienced [ ]

I give permission for my child to participate in the Swimming Program and travel by bus to and from Leisure City, Epping.

Where the teacher in charge of the excursion is unable to contact me, or it is otherwise impracticable to contact me, I authorize the teacher in charge to:

* consent to my child receiving such medical or surgical attention as may be deemed necessary by a medical practitioner,
* administer such first-aid as the teacher in charge may judge to be reasonably necessary.

I am able to help at the pool. [ ]

PARENT / GUARDIAN NAME: __________________________________________

PARENT / GUARDIAN SIGNATURE: ______________________________________ DATE: __________________________

My contact phone no for the day is: ____________________________