Grade 3 & 4 SWIMMING PROGRAM 2011

170 Glen Iris Rd Glen Iris Victoria 3146
Tel: 9885 3624 Fax: 9885 4465

Dear Parents,

On Monday 22 August 2011 your child will begin a semi-intensive swimming program. Children will be completing the program at Bialik College (407 Tooronga Road, East Hawthorn) and will travel by bus. This aquatic centre is an excellent facility with high quality instructors.

ALL CHILDREN MUST WEAR A BATHING CAP FOR SWIMMING. IT IS A RULE OF THE AQUATIC CENTRE.

Goggles are optional but a good idea! You can purchase a bathing cap / goggles at any public swim centre. All girls must have their hair tied up for ease of putting on caps.

Total Cost: $126 per child this is an extra payment that is NOT included in the excursion levy. The cost includes pool hire, swimming instructors and buses with seatbelts for 7 sessions. As we are trying to keep the costs as low as possible we cannot refund or discount for individual lessons missed. All children must wear their bathers under their school uniforms and change at the end of their lesson.

Please Note: The first session must depart Glen Iris at 9.15am. The bus cannot wait for latecomers or students will miss part of their lesson. Please take the time to look at the timetable on the next page.

Please make sure that ALL belongings are clearly labelled and that a plastic shopping bag is included in swimming bags for wet bathers and towels. Children will be required to bring thongs to wear to and from the pool. Children are not to come to school in thongs but will be given the opportunity to change into them.

Each class will require one adult to assist with supervision on the bus for each session, if you are available please let your classroom teacher know in advance.

We would appreciate parents who can assist us with changing to meet at the pool. Please note that parking is NOT available in the school grounds however you can park in Tooronga Road and enter by the pedestrian gate. Please see your class teacher if you can assist.

The permission form, with payment should be returned to school by MONDAY, 1 AUGUST.

Regards

Andrew Cavell

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I consent to my child ___________________ Grade __________ participating in the Swimming Program at Bialik College beginning on Monday 22 August 2011 and running for seven sessions.

I hereby authorise the person in charge to contact the nearest doctor available and arrange any necessary hospital treatment or ambulance transport, in the case of an emergency and accept responsibility for any costs involved.

☐ Please find enclosed $126 to cover swimming expenses.

Signed __________________________ (parent/guardian) Name __________________________

Emergency contact numbers on day of excursion ____________________ , ____________________