



**ROSALIE PRIMARY SCHOOL
INTERM SWIMMING LESSONS – 2021
YEARS 1 to 6**



All children in years 1 to 6 will commence Interm-Swimming lessons on **Monday 6 December 2021**

To help us with our organisation could you please complete and return the attached forms, Stage Enrolment and Consent form (1 form for each child attending) **to their classroom teacher by Monday 29 November 2021**

Children in the first group – Rooms 5, 8 and 20 are requested to wear their bathers to school under their normal school uniform and bring underwear to change into after lessons. All other children should bring their bathers and towel to school with them each morning. Arrangements will be made for the children to change into their bathers at school prior to leaving for lessons. Children will change into their school uniform back at school. Please ensure all clothing and towel has your child's name on it, also bring in a plastic bag clearly named for all wet items. Thongs/sandals can be worn to lessons, but appropriate school shoes/sandals are required at school.

- **Lesson Dates:** Monday 6 December to Wednesday 15 December 2021
- **Lessons are at:** Claremont Pool
- **Lesson times:** 9.15am – Rms 5,8,20 / 10.00am – Rms EL1,14,17 / 10.45am – Rms 3,15,19 / 11.55am – Rms 7,9,18 / 12.40pm – Rms 2,4,13 / 1.25pm – Rms 1,6,12
- **Cost:** \$45.00 Payment to be made on this advice – no account issued.
- **Payable By:** Prior to lessons no later than 30 November 2021 bank transfer BSB No. 016460 A/C No. 340892113 – Please put **Student surname and initial**.
- All students are encouraged to be 'sun-smart', to use sunscreen and appropriate 'T-shirt' or 'rash shirt'. Please be conscious of the weather and include a warm jumper if your child feels the cold.
- Swimming goggles are permitted, but snorkelling goggles are not suitable.
- Students with long hair are requested to have it tied back before arriving at lessons. It is not appropriate to wear jewellery or to bring valuables to swimming lessons.

Ros Kay - Principal



Government of Western Australia
Department of Education

TO BE COMPLETED BY PARENT:

Interm Swimming ENROLMENT FORM

I give my child _____ Age _____ School Rosalie Primary School

(Full Name PRINT BLOCK LETTERS)

Room Number _____ permission to attend Department of Education's Interm Swimming classes at Claremont Pool

Commencing on 6 / 12 / 2021 Amount payable to school \$45.00 (Lessons for Government schools are free. Payment is for transport and pool entry)

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 below if necessary**

Please provide details of medication currently being taken (if applicable): _____

Is there any other information swimming staff should be aware of to enable your child to fully participate in Interm Swimming lessons? (e.g previous incidents in water related activities) **IF IN ANY DOUBT PLEASE CONSULT YOUR SCHOOL PRINCIPAL**

*Swimming staff cannot take responsibility for medical conditions or diagnosed disabilities that are not listed on the returned form.

**If necessary please consult your Principal well in advance of swimming lessons to discuss appropriate learning adjustments.

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 Number	8. Water/Surf Wise
1. Beginner	9. Senior
2. Water/Surf Discovery	10. Jnr Swim & Survive/ Surf Stage 10
3. Preliminary	11. Swim & Survive/ Surf Stage 11
4. Water/Surf Introduction	12. Snr Swim & Survive/ Surf Stage 12
5. Water/Surf Safe	13. Wade Rescue/ Surf Stage 13
6. Junior	14. Accompanied Rescue/ Surf Stage 14
7. Intermediate	15. Bronze Star (pool only)

My child is going for Stage Number

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 (3) Department of Education certificates.

Signature: _____ Parent daytime phone number: _____ Date: _____

(Parent/Guardian)

ROSALIE PRIMARY SCHOOL



PARENT INFORMATION SHEET – PROPOSED EXCURSION

CLASS/CLASSES:	Years 1 to 6
DATE:	Monday 6 December to Wednesday 15 December 2021
VENUE:	Claremont Pool
Activities to be undertaken:	Interm Swimming Lessons
Leaving Rosalie:	9am – Rms 5, 8, 20 / 9.45am – Rms EL1, 14, 17 10.30am – Rms 3, 15, 19 / 11.40am – Rms 7, 9, 18 12.25pm – Rms 2, 4, 13 / 1.20pm – Rms 1, 6, 12
Estimated Arrival back at Rosalie:	10.10am, 11am, 11.40am, 12.50pm, 1.35pm, 2.20pm consecutively.
Transport arrangements	Horizons West

Supervision to be provided:

Teaching Staff	Parent Helpers/Others
Jo Pierce	
Class Teachers	

Student contact during excursion:

Please contact the school on 9366 9700. We have strategies in place to make contact with the teacher in charge of the excursion.

Are costs covered through the School Activity Charge – No

If no, details are: **\$45.00 due by 30-11-21. Payment details on page 1, no account issued.**

In case of accident or illness on the excursion staff will remain with the student/s, seek appropriate help or medical assistance and contact the school.

Special clothing or other items required/special lunch arrangements: _____

Teacher in charge of excursion: Jo Pierce

Further Information:

Please inform your child's class teacher prior to this excursion of any alteration to medical details previously provided.

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CONSENT

EXCURSION/INCURSION - Interm Swimming Dates: 6 December to 15 December 2021

I am aware that any costs incurred as a result of accident or illness are my responsibility and that school staff are not responsible for any loss or damage to my child's personal property that may occur during the course of the excursion.

I agree to inform the organisers before the scheduled excursion departure of any change to my child's health and fitness so that appropriate supervision may be arranged. I acknowledge that, should it be considered necessary, school staff will arrange to present my child for medical assessment.

I have read and understand the information regarding the excursion and give consent for my

son/daughter (full name) _____ in Room _____ to attend.

Signature of Parent/Guardian: _____ **Date** _____

This consent form **must** be returned to the school before the student can participate in the excursion.
Please return both forms to the classroom teacher by Monday 29 November 2021