

Cambridge Gardens Public School

Innovation, Excellence, Connections & Fun

School Swimming and Water Safety Program

Tuesday 30th July, 2019

Dear Parents,

This letter is to provide you with information regarding the **School Swimming and Water Safety Program**, details of which are outlined below.

Date:	Monday 14 th October until Friday 25 th October, 2019. Students will attend lessons every school day for 2 weeks.
Educational Rationale:	To teach water confidence and safety by teaching students how to swim. The program teaches all swimming strokes and extends swimming skills for those already able to swim. Trained swimming instructors test and teach the children in small groups based on their swimming ability.
Excursion to:	Penrith Ripples
Venue's contact details:	119 Station St, Penrith NSW 2750 Phone: (02) 4721 3625
Classes attending:	Students from Freedom, Wonder, Serenity, Success, Humour, Ambition, Honour, Knowledge, Motivation, Strength and Nurture.
Depart:	Group 1- 12.30pm Group 2- 1.15pm
Return:	Group 1- 2.15pm Group 2 – 3.00pm
Organising Teacher:	Mr Shanan Wood
Dress:	Students may arrive at school with their swimwear underneath their school uniform.
Transport:	Bus
Cost per student:	\$75.00
Payment:	The preferred method of payment is made online through our school website ("Make a Payment" also known as "POP")
Specific Requirements:	Sunscreen, sunsafe swimwear, underwear and a towel.
Return this note by:	9:30 am Friday 30 st August, 2019 or once 120 students have committed.
Special Note:	*The program can only accommodate 120 students. Places will be allocated to students upon receipt of both payment and permission for the excursion. * The program commences on Day 1 of Term 4: Monday 14 th October, 2019. *Please note that following the closing date no refunds are possible for bus cost as we have booked and committed numbers.

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All payment slips and permission notes to the front office please

Permission Note — School Swimming and Water Safety Program

I give permission for my child _____ of class _____ to attend the **School Swimming and Water Safety Program** from Monday 14th October until Friday 25th October, 2019.

I understand that travel will be by bus and the Principal has approved this excursion.

Please advise of any changes to the medical details the school has on file and any allergies or conditions that may affect your child on the day.

Medication/Time required _____

Please tick:

- Payment made online through POP - Please put **Surname-swimming** in payment description Receipt No.:

- Please find enclosed \$75.00 for the **School Swimming and Water Safety Program**

Parent Signature _____

Date _____

Please sign and return the attached permission and payment slip to the office no later than **Friday 30st August, 2019.**

Mr Adam Wynn
Principal

Mr Shanan Wood
Organising Teacher