Dear Parents,

The swimming sport program for Years 3-6 children and any capable swimmers in Year 2, who will turn 8 this year (and can confidently swim the length of Jindera pool unaccompanied and unaided) will be conducted again this term.

Generally, swimming sport will be conducted in two sessions:

- **non swimmers and those children wishing to do water aerobics.**
- **confident swimmers who will be involved in squad training or stroke correction** where we will concentrate on developing fitness and stroke correction.

We hope this will enable us to provide more valuable programs for the children. Unfortunately, this year, we are competing for the pool with an increasing number of local and non-local schools. This means that, on some occasions, the groups will be combined for games, races and water safety activities.

Swimming sport sessions will be held on Fridays 13/11, 20/11, 27/11 and 4/12.

To participate in swimming sport, students will need to bring $1.50 entry money to pay to the pool each week (unless they have a season ticket). The children will also need to bring swimmers, rash top, towel, hat, water bottle and sun screen. It is also advisable for those children doing squad to wear goggles.

We would also welcome any parents who would like to come along and support the programs.

Our School Swimming Carnival will be held on Friday, 12 February 2016. **Further, more detailed notes will follow concerning this carnival.**

For your child to be involved in swimming sport, please complete the permission note and return to the boomerang blue box by **Monday, 9 November 2015.**

Lianne Singleton  
Principal  
3 November 2015
Jindera Public School    -    Term 4 Swimming 2015

I give my permission for my child ____________________ of class ________ to participate in swimming for sport at the Jindera Swimming Pool on Fridays 13/11, 20/11, 27/11 and 4/12.

My son/daughter has the following special needs (please provide full details and include any relevant medical information).

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I give / do not give (please circle) permission for my child to receive medical treatment in case of an emergency

My child is a non swimmer / capable swimmer (please circle) and can swim ________ metres confidently.

Signed _____________________________________ (parent or caregiver)

Date ______________________

Session Selection - please indicate below a choice for Friday Swimming Sport. All students will be swim tested, to determine swimming ability, prior to participation in swimming sport.

☐ Non Swimmers:- (for children who cannot swim 25m unassisted or unaided. Session will involve water confidence, learn to swim.)

☐ Water Aerobics:- (in shallow end and middle of the pool - exercise using kickboards, noodles and water resistance to music.)

☐ Stroke Correction:- (for students who can swim 25m unassisted but are developing fitness and correct swimming styles.)

☐ Squad Training:- (confident, competent swimmers - to develop strength and fitness.)