

Somerford Primary School

Draper Road, Christchurch, Dorset BH23 3AS Tel : 01202 485436 Fax : 01202 482359 Email : <u>office@somerford.dorset.sch.uk</u> Website : <u>www.somerford.dorset.sch.uk</u> Headteacher: Mrs H Frampton

Wednesday 11th September 2019.

Dear Parents

We are pleased to inform you that swimming lessons will begin this term for Year 4.

Year 4 will be swimming for the whole of the Autumn term at the 2Riversmeet leisure centre on a Monday morning. They will have 10 half hour swimming lessons over the term with qualified swimming instructors starting on 23rd September 2019. The children will travel by coach to and from the sessions.

The school is heavily subsidising the cost of the lessons and we have managed to keep the cost at £2.20 per session which is the same as last year.

We require you please to:

*return your child's permission slip by Thursday 19th September

*ensure your child remembers their swimming kit and towel each Monday

*discuss with your child's class teacher if your child is nervous about swimming

*ensure you pay the weekly £2.20 donation through Sims pay/Agora

We strongly encourage all parents to pay for swimming through Sims pay/Agora, if this is not possible then cash will be accepted only at the School Reception where it will be counted and recorded immediately. Exact change only will be accepted – the School reception is not able to give out change. Please do not give cash to your child to hand to the teacher.

Health and Safety guidance advises us that children should not wear goggles as they pose a health and safety risk. As last year, children will not be able to wear goggles during the swimming lessons. Please ensure you speak to your child's class teacher **before the lessons commence** if you need to discuss this. If you send a note in on the day without discussing it with the teacher your child may not be able to swim.

2Riversmeet do not require children to wear swimming hats. We expect all children to swim each week.

If you would like to discuss any of this further or have any questions, please speak to your child's class teacher. Please return the slip below as soon as possible.

Yours sincerely

Mr Wallace Deputy Headteacher

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RETURN BY: Thursday 19th September 2019

Child's name_____ Class_____

I give permission for my child to travel by coach to and from the 2Riversmeet leisure centre and to participate in swimming lessons on September 23rd, September 30th, October 7th, October 14th, October 21st, November 4th, November 11th, November 18th, November 25th and December 2nd

I understand there is a £2.20 donation per session each week

Signed______

Date_____

RETURN BY FRIDAY 14th SEPTEMBER 2017

Child's name_____ Class_____

I give permission for my child to travel by coach to and from the 2Riversmeet leisure centre and to participate in swimming lessons on September 17th, September 24th, October 1st, October 8th, October 15th, November 6th, November 12th, November 19th, November 26th and December 3rd

I understand there is a £2 donation per session each week

Date_____

If you wish you child to wear goggles for swimming, please read the statement below, state the reason why they need to wear goggles and sign to accept agreement with this.

I understand that it is against Dorset County Council advice to wear goggles for swimming as a result of accidents that have happened. Therefore, I accept full responsibility for any accidents that might occur to my own child or other children while my child is wearing goggles for their swimming lessons.

My child needs to wear goggles because _____

Signed: _____

Date:_____

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