



Maddington Primary School

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2022 INTERM SWIMMING LESSONS: EXCURSION INFORMATION FOR PARENTS

REASON FOR EXCURSION

As part of the Physical Education program, the Department of Education encourages all children to attend swimming lessons. Children are exempt only if a medical certificate is produced.

COST

Thanks to Mrs. Phillips securing a Sporting Schools grant, the cost will only be \$9.00. **Forms and payment are DUE BACK BEFORE FRIDAY 28 OCTOBER, 2022.** Please bring these to the front office.

DATE(S)

Monday 7 November to Friday 11 November 2022 (Week 5 – one double lesson (80 min session (60 mins on Wednesday) each day)

LOCATION

Darling Range Sports College, 117 Berkshire Road, Forrestfield

TRANSPORT ARRANGEMENTS

Horizons West – Bus Company

ITINERARY

Group	Mon Tues Thurs Fri: 80 minute lessons		Wednesday: 60 minute lessons	
	Depart school	Return to school	Depart school	Return to school
Group 1 (Pre-primary, Room 1, Room 8)	8:45	10:20	8:45	10:45
Group 2 (Room 3, Room 6, Room 7)	10:25	12:45	10:15	12:15
Group 3 (Room 9, Room 15)	12:20	2:40	11:35	1:25

Every student must bring a drink bottle with their name on it.

Group 1 are to come to school dressed in their bathers. Group 3 will go home in their bathers.

STUDENT CONTACT ARRANGEMENTS DURING EXCURSION

Contact the Maddington Primary School office and they will be able to assist you. Staff attending the excursion will have mobile phones for emergencies.

SUPERVISION TO BE PROVIDED

Classroom Teachers and Education Assistants. Swimming Teachers are all qualified and work for the Department of Education Swimming program.

SPECIAL CLOTHING OR OTHER ITEMS REQUIRED

Groups 1 and 2 will change into their clothes when they return to school. Students need to bring:

- Towel & bathers (LABELLED).
- Underwear.
- Bag for wet clothing and towels.
- Bag for carrying clothing to and from the pool.
- Goggles are optional.
- Thongs may be worn to and from the pool only.
- Normal footwear is required for the rest of the day.

ALL CLOTHING AND TOWELS NEED TO BE CLEARLY LABELLED WITH YOUR CHILD'S FULL NAME.

Jemma Keys

Deputy Principal
12 October 2022

CONSENT FORM FOR INTERM SWIMMING LESSONS

TO BE RETURNED SIGNED TO THE SCHOOL BY FRIDAY 28 OCTOBER 2022

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 well 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 and treatment.

My child's student health care summary is up to date

OR

The following details have changed from those recorded on my child's student health care summary

I acknowledge that;

- Should my child need to be withdrawn from the excursion for breaching the School Code of Conduct, it will be my responsibility to arrange to have them collected from the venue as soon as I am contacted.
- Any costs involved in returning my child to school will be passed on to me.

Contact Information

Mobile: _____	Home: _____
Work: _____	Other: _____
I have read and understood the information regarding the Interm Swimming Lessons from the 7-11 Nov 2022 and give consent for my son/daughter to attend.	
<i>I have made payment for the \$9.00 cost of the excursion</i>	
<input type="checkbox"/> Cash- enclosed <input type="checkbox"/> Bank transfer receipt no.: _____ <input type="checkbox"/> Eftpos at office	
Child's Name: _____	Room No. _____
Parent/guardian name: _____	
Parent/guardian signature: _____	Date: _____

Interm Swimming ENROLMENT FORM

PARENT TO COMPLETE FORM AND RETURN TO SCHOOL BY FRIDAY 28 OCTOBER

I give my child _____ Age _____ Class _____ of Maddington Primary School

(Full Name PRINT BLOCK LETTERS)

permission to attend the Department of Education's Interm Swimming classes at Darling Range Sports College, from 7-11 NOVEMBER 2022.
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 adjustments?* NO YES **Please provide further information below

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.

1. Beginner	8. Water/Surf Wise
2. Water/Surf Discovery	9. Senior
3. Preliminary	10. Jnr Swim & Survive/ Surf Stage 10
4. Water/Surf Introduction	11. Swim & Survive/ Surf Stage 11
5. Water/Surf Safe	12. Snr Swim & Survive/Surf Stage 12
6. Junior	13. Accompanied Rescue/ Surf Stage 13
7. Intermediate	14. Accompanied Rescue/ Surf Stage 14
	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/Guardian) **Parent daytime phone number:** _____

Date: _____