



Oxenford State School

Knowledge Brings Growth

SWIMMING LESSONS – 2017

90 Michigan Drive
Oxenford Qld 4210
Ph: 07 5585 7666
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Dear Parents/Carers,

In Term 4, beginning 31st October and continuing through to 16th November, we will be conducting swimming lessons for all students from Prep through to Year 6 (Tuesday and Thursday each week). Swimming is an integral component of our HPE program, and as such, we expect all students to participate. We also have a duty of care to ensure students are given the opportunity to learn to swim and improve their technique / skills. We live close to lakes and rivers in the Oxenford area, we are close to beaches and so many houses on the coast have a swimming pool. We know that a lot of our students are not able to swim and are not "water safe". I am sure you will agree it is essential that all students are able to access these vital lessons. In saying this, we do need your support to make sure as many students as possible are able to attend. If financial difficulties mean you are not able to cover the cost of the lessons, could you please contact me personally so that we can come to a suitable arrangement.

We have negotiated a very competitive rate for each lesson and are able to charge **\$40.00** for the entire 6 lessons and the bus fare. These lessons are held in small groups (2 per week over 3 weeks) and each student gets instruction specific to their individual needs.

We are aware that some students will say they don't want to participate (especially in the senior classes), usually because they don't want to let others know they can't swim, but we would be very appreciative if you could let them know it is non-negotiable. After all, swimming is an essential life skill. Students who already have swimming capabilities will participate in extension programs, to further develop their skills. Also, all students in Years 4-6 will be participating in our Swimming Carnival on 6th December, so without participating in the swimming lessons they will be unable to participate in the carnival. Further details around the Swimming Carnival will be issued closer to the event.

Permission notes and money need to be returned by **Friday 20th October**, so that we can confirm numbers and buses. Please do not hesitate to contact me for further details regarding our swimming program if you should need to. Please complete and sign the permission form below and return to the office with the **\$40.00** payment, the attached medical details form and the student pre-assessment form.

Yours Sincerely,

Tim Stark
PE Teacher

Alisha LeBrese
Principal

Activity Risks & Insurance. Please note that the Department of Education and Training does not have personal accident insurance cover for students. If your child is injured as a result of an accident or incident while participating in the activity, all costs associated with the injury, including medical costs are the responsibility of the parent/carer. Some incidental medical costs may be covered by Medicare. If you have private health insurance, some costs may be also be covered by your provider. Any other costs must be covered by parents/carers. It is up to all parents/carers to decide what types and what level of private insurance they wish to arrange to cover their child. Please take this into consideration in deciding whether or not to allow your child to participate in this activity.

Privacy Notice The Department of Education and Training (DET) is collecting the personal information requested in this form in order to, obtain lawful consent for your child to participate in the activity. Help coordinate the activity, respond to any injury or medical condition that may arise during, or as a result of the activity and update school records where necessary.

The information will only be accessed by authorised school staff and will be dealt with in accordance with the confidentiality requirements of s.426 of the Education (General Provisions) Act 2006 (Qld) and the Information Privacy Act 2009 (Qld).

The information will not be disclosed to any other person or agency unless it is for a purpose stated above, the disclosure is authorised or required by law, or you have given DET permission for the information to be disclosed.

Swimming Lessons at the Helensvale Aquatic Centre
Please return Consent Form with payment to the office by Friday 20th October 2017

Consent

By signing this form I agree that:

- I have read all of the information contained in this form in relation to the activity and I am aware that the Department of Education and Training does not have personal accident insurance cover for students.
- I give consent for my child, _____ in class _____, to participate in Swimming Lessons at the Helensvale Aquatic Centre in October and November 2017.
- In the event of an accident or illness, school staff may obtain or administer any medical assistance or treatment my child may reasonably require.
- I accept liability for all reasonable costs incurred by the Department of Education and Training in obtaining such medical assistance or treatment (including any transportation costs) and undertake to reimburse the Department of Education and Training the full amount of those costs.
- I have provided the school all relevant details of my child's medical or physical needs on enrolment and where relevant have updated this information.
- Please note that this is the full price for the swimming lessons and cannot be paid in part.
- No refunds will be available should your student be absent for one or more lessons.

Parent/Carer Name: _____ (Please Print)

Parent/Carer's Signature: _____

Date: ____/____/____

PAYMENT OPTIONS

Payment can be made at school using cash, cheque and EFTPOS (Wednesdays and Fridays between 8:30 – 10:00am ONLY) or

The schools preferred method of payment is BPOINT which can be located at www.bpoint.com.au/payments/dete
The details required to make payment by BPOINT are located on your invoice.

Pay by phone: Simply ring the Administration office on a Wednesday or Friday between 8.30am–10.00am with your credit/debit card details

Payment via the internet: School's Bank Account Name: BSB: 064 401 A/C: 00904551
Reference details: Please record student name & payment reason (B Smith-Swim).
Date of Deposit: _____ Amount of Deposit: _____ Reference Used: _____

Please find enclosed Cash/cheque for \$

I will be paying \$ _____ by credit /debit card

Cardholder's Name: _____ Amount: _____

Card No. _____ Expiry Date: ____/____

CCV: _____ Signature of Cardholder: _____ Date: _____



School Swimming Student Pre-Assessment Form

Dear Parent / Guardian, we are pleased to be providing swimming lessons for your child's school swimming program this year. We would appreciate you taking the time to complete the details below for your child. On the first day of the program your child will be grouped according to the information you've supplied. During the swimming program you should expect your child to gain an increased level of aquatic awareness, swimming ability and safety skills.

We look forward to working with your child and hope they enjoy their experience at the center.

Student Name			
School Attending			
Medical/Allergies Details			
Year/Class	Year		Class
Does your child attend weekly swim lessons?	Where?		What Level?
Parent Name		Mobile	
Parent Email		Phone	

Student Swimming Ability	Please tick the abilities that apply
◆ Unable to swim without floatation aids, not confident in the water	
◆ Confident in the water with floatation aids	
◆ Dog paddle with face in water for 5 metres unaided	
◆ Freestyle for 5 metres unaided & back float unaided	
◆ Freestyle & Backstroke for 10 metres with reasonable technique	
◆ Freestyle & Backstroke for 10+ metres with advanced technique, with basic Breaststroke	
◆ Freestyle & Backstroke 25 metres, Breaststroke & Butterfly kick for 15 metres	
◆ Freestyle, Backstroke & Breaststroke for 50 metres, Butterfly for 25 metres	
◆ Freestyle, Backstroke & Breaststroke for 100+ metres, Butterfly for 50+ metres	

All students will be entitled to 2 free lessons upon completing our School Swimming Program. Please tick the box provided if you would NOT like to be contacted for your free 2 lessons:

(I do NOT wish to be contacted).