

Whitstable Junior School

Oxford Street, Whitstable, Kent, CT5 1DB Tel: (01227) 272385 Head Teacher : Ms Sarah Kent

e-mail: manager@whitstable-junior.kent.sch.uk

Friday 8th March 2024

Dear Parent/Carer

3B Swimming Lessons during Term 5 2024

We are pleased to be able to advise that swimming lessons at the Whitstable Active Life Swimming Pool, will be starting on **Tuesday 16th April (second day back after the Easter holidays)** from 2pm to 2.30pm.

The children will return to school for normal school pick up at 3.15pm from the playground.

The children will swim in 3 groups with one instructor per group. Please be aware that swimming is part of the PE Curriculum; however, we do appreciate that for some children the change in environment, routine, clothes, smell and/or idea of water can cause some level of anxiety, please do not hesitate to contact your class teacher or email <u>manager@whitstable-junior.kent.sch.uk</u> should you require any support or advice. We do recommend taking your child down to the pool prior to commencing lessons; this can help them feel more at ease if they have never been before.

Please note, we would need a letter from you explaining why your child is unable to take part in a swimming lesson.

Please ensure that your child brings their swimming costume, goggles and towel in on the correct day. Children must wear a one-piece swimming costume or above-the-knee swimming shorts and T-shirts can also be worn. Any pupil with hair that is shoulder-length or longer will need to ensure it is tied back.

DATES FOR SWIMMING

3B will be swimming on the following dates from 2pm – 2.30pm 16th, 23rd, 30th April and 14th and 21st May



We are asking for a contribution of **£3.00** per lesson towards the costs (**total of £15.00**). Payments will be available online through SchoolMoney. If you have any problems logging on, or cannot pay online, please contact the office.

Please complete and return the permission slip to the school office by <u>Friday 22nd March 2024</u>. Should you have any queries regarding pick-up or swimming then please do not hesitate to contact me.

Regards, *Mrs Roy* PE Lead Co-ordinator



















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Please complete the form in full and return to the school office by Friday 22nd March 2024

SWIMMING Term 5

I agree for my child (*insert name*) ______ in 3B to swim at Whitstable Swimming Pool in Term 5 2024, every Tuesday from 2pm-2.30pm

I agree to pay £3.00 per session (total £15.00) for the 6 sessions [] (Please tick here)

I need support in paying £3.00 per session and would like the office to contact me \Box (*Please tick here*)

Child's Date of Birth:
Name of child's Doctor:
Doctor's Tel No:
My child has (please tick);
No illness, allergy or physical disability
□ The following illness, allergy or physical disability:
Which necessitates the following medical treatment:
l consent to any emergency medical treatment necessary during the course of the event. (Yes / No)
Parent/Carer:
Signature: Date:

















