Parent Information Notice

Dear Parent/s

The Swimming Program for the whole school will commence on Monday 17th October, at Maribyrnong Leisure Centre and continue daily until Friday 28th October. The children will be attending with their class for 10 days.

The cost of the program is included in the Sports Levy. There is an average of one swimming instructor to 10 children, with BSW staff monitoring groups. As this is an important part of the school’s Health and PE program we expect that all children attend.

If you know your child cannot attend the program please indicate this in the box provided on the permission form and return as soon as possible.

**Parental Involvement**- We would welcome your assistance with swimming. We will require some parents on buses to cover the ratio needed. Please indicate on the permission form if you can help. Unfortunately we are unable to accommodate parents with toddlers. If you drive yourself to the centre, you will need to pay an entry fee at the pool for any child you bring with you.

To ensure children can change as quickly as possible following their lesson, we ask that all children bring thongs/crocs to wear to the pool. All children will change into their shoes upon returning to school. Please do not take valuables to the pool.

Please return the Permission Form to your child’s teacher, ASAP, but by THURSDAY, 15TH SEPTEMBER, 2016.

*If there is any medical information concerning your child that should be brought to our attention, please be sure to complete the attached permission form.*

The swimming program will be conducted in five (5) sessions each day. Your child will go in the same group each day. The session times for each group will be posted in the newsletter closer to the start of the program.

Thanks
Shar Dickinson
Schools’ MACqua Education

GUIDELINES FOR SAFE ENJOYMENT OF OUR PROGRAM.

Please advise Parents/Guardians/Teachers of these guidelines when advertising your program.

1. **ALL parents** MUST enter through our main entrance doors and report to customer service to advise that they are watching the swim program with the school.

2. Only students, accompanying school teachers, student teachers and aides may enter the Maribyrnong Aquatic Centre through the schools entry door. Please make the doors are not left ajar once children and teachers have entered

3. No photographs may be taken by parents. Schools may take photographs for school usage. All school photography must be handled by a school staff member and they MUST fill in an appropriate form located at the Customer Service Desk.

4. **Parents and Spectators** must remain 4 metres from the edge of the pool, and may not approach children or swim teaching staff during lessons. It distracts the children, and can lead to safety issues if we need to perform a pool evacuation.

5. Any concerns or issues are best dealt with at the time of the incident. Please report any problems immediately to your own school teachers who will then decide if it is necessary to contact the appropriate swim centre staff member.

6. Whistles are not permitted to be used by school teachers whilst in the Maribyrnong Aquatic Centre due to the centres OH & S regulations and the Emergency Action Plan.

7. MAC and Department of Education regulations require a school teacher to be immediately available to all swim lessons areas to attend to sudden illness, toileting and first aid needs of children involved in the swim program,

MAC-AQD036-06

updated 8/6/13
Permission Form

My child **will** attend the swimming program and I give my Permission, as per below

My child **will NOT** attend the swimming program

Please Sign, Complete Medical Information and Return form

Please Sign and Return form

_________________________  ________________  __________________________
PARENT’s Full Name  CHILD’s Full Name  TEACHER’s Name

______________________________
PARENT SIGNATURE

Contact number/s in case of emergency

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**Permission**

**Swimming Program Permission**
I give permission for my child above to attend the Swimming Program at Maribyrnong Leisure Centre from **Monday 17th October to Friday 28th October** inclusive.

**Inflatable Playground Permission**
I give permission for my child above to go on the Inflatable ‘Playground’ during the Swimming Program at Maribyrnong Aquatics Centre.

In the event of an emergency and where it is impractical to communicate with me, I authorise the teacher in charge of the excursion to consent to my child receiving such medical attention as deemed necessary.

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**Parent Help**
If you are able to help with swimming, please indicate times / days you can assist. Thank You.

Day/s ____________________________  Times: ____________________________

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**Medical Information**
Please provide relevant details:

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