



Nar Nar Goon Primary School

Office copy.

Foundation-2 Swimming 2018 Term 3

Dear Parents,

This year's F-2 Swimming Program will begin Wednesday 12th September at Cardinia Life YMCA in Pakenham. The cost for the Program is substantially reduced this year, due to money in the last State Budget allocated to support schools to fulfil the swimming and water safety requirements of Health and Physical Education, in the Victorian Curriculum. At **\$55.00**, all costs including transport, lessons and a Certificate of Achievement, are covered, representing great value for money (approx \$9 per lesson!) The Program helps to develop important swimming and personal development skills. Students will be in small groups (max 6) and assessed early to ensure they gain the most value for money. We are looking forward to the fun and learning this important part of our P.E and Personal Development Programs, provides.

Kind Regards

Junior School Team

Summary of Details

Dates: Wednesday 12th, Thursday 13th, Friday 14th, Monday 17th, Wednesday 19th & Friday 21st September.

Cost: \$55.00

Time of departure from school: 9.30am for lesson at 10.00-10.45am (Group 1 all Year 2 students and F/1W)
10.15am for lesson at 10.45-11.30am (Group 2 F/1S & F/1F)

Arrival back at school: 12.15pm approx

Equipment Required: Bathers and Towel

Permission Form/Payment: \$20.00 Deposit by Friday 31st August (Payments may also be made in full at this time)
\$35.00 Balance Due back by Friday 7th September

Venue: Cardinia Life Pakenham 4 Olympic Way Pakenham



Nar Nar Goon Primary School Permission Form: F-2 Swimming 2018

My child _____ of Grade _____ will /will not (please circle) be attending F-2 Swimming at Cardinia Life Pakenham.

Enclosed (please tick) \$20.00 Deposit (bal payable by 7th September) \$55.00 Full Payment CSEF Credits (if applicable)

I give permission to the teacher in charge of the excursion to consent, where it is impossible to communicate with me; to my child receiving such medical or surgical treatment as may be deemed necessary.

Signed: _____

Date _____

Emergency Contact: _____

Ph: _____