

TEVEN-TINTENBAR PUBLIC SCHOOL

FREDERICKS LANE TINTENBAR NSW 2478 • PHONE: (02) 6687 8210 • FAX: (02) 6687 8086 RESPECT-RESPONSIBILITY-RESULTS

SWIMMING PROGRAM 2018 - BALLINA

10 day Scheme \$100.00. Ballina Pool Monday 19th November to Friday 30th November

All children K-6 will be partiicpating in Swimming With Francis lessons at Ballina Pool from Monday 19th November to Friday 30th November for a 1 hours lesson. (10 lessons in total) Lessons will take place at Ballina Pool under the instruction of qualified teachers. The program will continue daily for two weeks.

This program has been subsidised so no further subsidies are available. The cost is half the cost of tuition plus the cost for transport and entry into the pool. **The total cost for the 10 day Scheme is \$100.00.**

3-6 lessons are 10-11am, leaving school at 9.30am. K-2 lessons are 11-12, leaving school at 10.30am.

IF YOUR CHILD HAS A SEASON PASS TO BALLINA/ALSTONVILLE POOL THE COST WILL BE \$85. Please note Active Sports Grant can not be used for school organised sporting activities

Ginny Latta Principal

Important Swimming Lessons Information for Parents

Link: https://app.education.nsw.gov.au/sport/page/1116

Lessons are taught by qualified swimming instructors from Swimming With Francis. There are no 'water fun' activities planned for this event.

Class teachers do not teach any lessons but will be in attendance as supervisors. For 3-6 group there will be 3 teachers and an SLSO. For K-2 there will be 4 teachers and an SLSO.

Location: Ballina Memorial Pool and Waterslide. 4 River Street Ballina

Children will be assessed during their first lesson and flotation devices/bouyancy vests will be provided if need be. Parents can also provide these items if they wish to.

Students are to use adequate sun protection, e.g. as a minimum a SPF50+, broad spectrum, water resistant sunscreen reapplied regularly and a hat when not in the water. As this takes place outside, students should wear a shirt for additional protection in the water. A rash vest is ideal for this purpose. Teachers-in-charge of student groups must observe the following procedures:

• The roll is to be called immediately prior to the swimming party leaving the school and confirmed on arrival at the swimming facility.

- Students are to be counted and paired at the facility before entering the water.
- All students in the water must be continuously supervised.

• Students are to be counted immediately the lesson or activity concludes as they leave the water. Teachers must make a thorough check of the water to ascertain that all students have left the pool.

• Teachers are to mark rolls after students have dressed and have congregated near the facility exit. Students are to be marked off the roll as they are dismissed and exit the pool premises. One teacher is to remain inside the venue until all students are marked off the roll and have exited the premises.

• If a student is missing, teachers must check the pool, the pool surrounds and change rooms; inform the pool attendant and the school principal

• No misbehaviour or unsupervised diving is allowed. Account should be taken of any language difficulty in instructions and directions.

• Under no circumstances is a student to be dismissed or marked off the roll within the facility.

Integrity-Co-operation-Acceptance-Respect-Excellence



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SWIMMING PROGRAM 2018 - BALLINA

Return to school **<u>BY WEDNESDAY 14th November 2018</u>** no late notes accepted.

I hereby give my informed consent to the attendance of my child ______ in class _____ at Swimming Lessons to be held at Ballina Memorial Pool and Waterslide, 4 River Street Ballina on Monday 19th November to Friday 30th November. I understand that travel will be by bus.

Total cost for 10 day program is \$100.00 and is payable with the return of this permission slip.	
My child has a season pass to Ballina Pool. I have therefore enclosed \$85 My child's pass number is:Name on pass is:	
Photocopy of the pass must be sent to school with note for this discount.	
I have paid online via POP. Receipt number	Date:
I have included \$ payment via Cash/Cheque. (EFPTOS available at front office).	
My child has the following illness / medi	cal conditions:
Anaphylaxis School has current plan and medication	
Allergies School has current plan and medication	
Please specify	
Asthma School has current plan and medication	
Other: please specify	
Current medications and dosage (this includes medication given at home).	
If your child has any medication on the morning of the lessons please send a note to school so the	
instructors are aware – even medications such as panadol.	
Signed	
NAME	LEGIBLE SIGNATURE

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