



St Thomas of Canterbury School,
A Catholic Voluntary Academy,
Chancet Wood Drive,
Sheffield,
South Yorkshire, S8 7TR

Tel: 0114 274 5597

Fax: 0114 274 5699

Email: enquiries@st-tc.co.uk

Web: www.st-tc.co.uk

Head of School: Liam Colclough
Executive Headteacher: Andrew Truby

8th Feb 2018

Dear Parent,

Swimming is a compulsory part of the National Curriculum and we will be taking our Y3 pupils to Graves Leisure Centre.

The sessions begin on Friday 16th February in the afternoon with the last session being on Friday 23rd March (5 sessions at 40 minutes per session) and are within the normal school hours. We will be walking up and will then be transported back to school by minibus.

Sessions dates are:

16th Feb 18

2nd March 18

9th March 18

16th March 18

23rd March 18

If your child uses an inhaler, he/she must have it with them on the poolside. If there are any medical issues, which may affect your child, please indicate on the permission slip.

To enable the swimming staff to tailor your child's needs regarding their ability please answer the questions on the permission slip.

Please note:

- No jewellery is allowed. (New piercings will prevent your child attending swimming lessons for six weeks.)
- Long hair must be tied back
- Goggles are generally not permitted
- No bikinis or Bermuda shorts

I'm sure the children will enjoy the sessions, which have many health benefits as well as providing an essential foundation for many other water-based activities.

Many thanks

Miss Cass





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Year 3 Swimming Lessons

I give permission for _____ to attend
swimming at Graves Leisure Centre.

Is your child a Swimmer Non swimmer

Does your child use flotation aids Yes No

Is your child currently having lessons Yes No

Distance to swim unaided _____

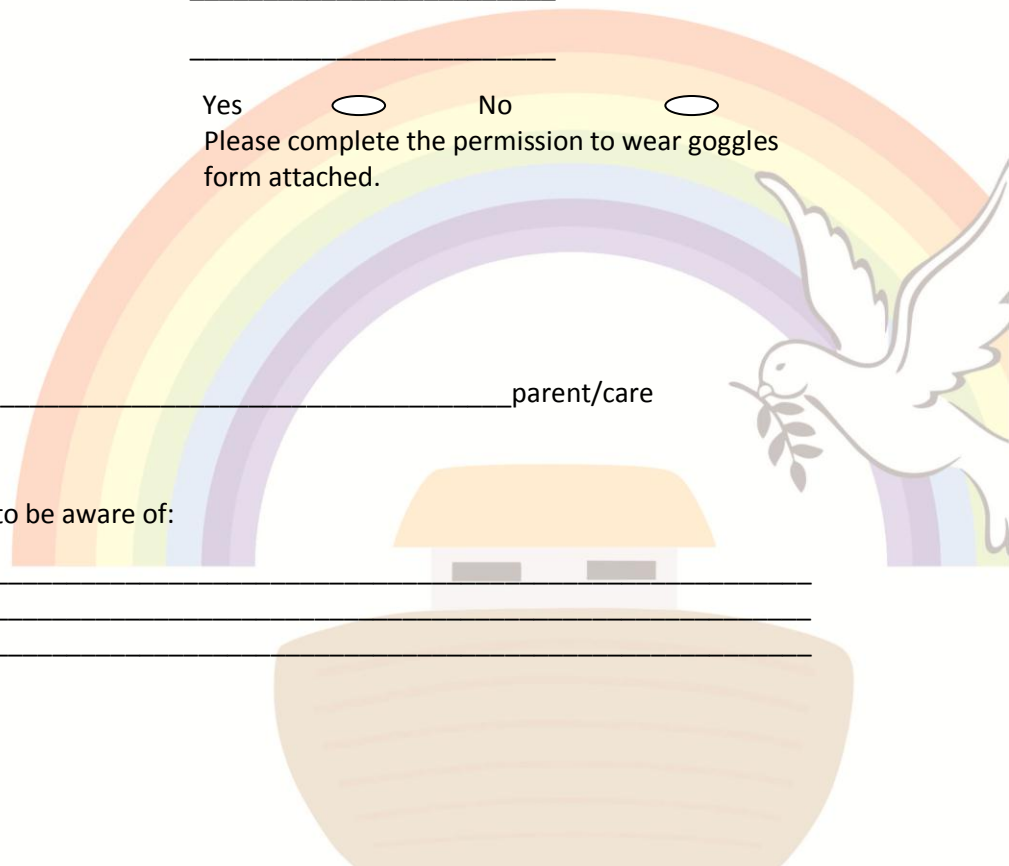
Any swimming qualifications _____

Swimming goggles to be worn Yes No

Please complete the permission to wear goggles
form attached.

Signed _____ parent/care

Any medical problems we need to be aware of:





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School Swimming Service

Permission to wear goggles

Childs name _____

School _____

Please allow the above named person to wear goggles during their school swimming lesson.

I understand that:

- Goggles will be worn at the owners risk
- There may be times that we ask that child not to wear goggles in order to meet their National Curriculum requirement; e.g. water confidence and personal survival.
- Any misuse of the goggles will result in confiscation – to be returned at the end of the lesson.

Signed _____ Parent Guardian

Print Name _____ Parent/Guardian

