



Falls Road Primary Independent Public School

Challenge the Present – Create the Future

11 May, 2022

ENROLMENT FORM - In-Term Swimming Lessons 2022

Dear Parents/Guardians,

Please complete the in-term swimming enrolment form for your child / children (1 per child) and return to school. If you are unsure about their swimming level, please tick **Unsure, please grade**.

These forms are then passed on to the swimming supervisor at St Brigid's Pool, Virginia Lanza, who sorts the students into groups. Students attend swimming lessons as a class group and are then divided up into their swimming stage groups.

THE IN-TERM SWIMMING ENROLMENT FORM MUST BE RECEIVED NO LATER THAN FRIDAY, 3 JUNE to allow students to be able to participate in the first lesson on Tuesday, 7 June.

Information regarding class groupings will be sent out in the week prior to swimming lessons starting.

Kind regards

Simon Docherty
Deputy Principal



Interm Swimming ENROLMENT FORM

TO BE COMPLETED BY PARENT:

I give my child _____ Age _____ School Falls Road PS
(Full Name PRINT BLOCK LETTERS)

Room Number _____ permission to attend Department of Education's Interm Swimming classes at _____
Commencing on ____ / ____ / ____ Enclosed is payment of \$ _____ (Lessons for Government schools are free. Payment is for transport and pool entry)

Is your child subject to asthma, seizures, fainting, epilepsy, diabetes, allergies or **any other condition or disability*** that may affect his/her safety, or require the school to provide learning adjustment? **NO** **YES** Please provide further information below if necessary**

Please provide details of medication currently being taken (if applicable):

Is there any other information swimming staff should be aware of to enable your child to fully participate in Interm Swimming lessons? (e.g. previous incidents in water related activities) **IF IN ANY DOUBT PLEASE CONSULT YOUR SCHOOL PRINCIPAL**

**Swimming staff cannot take responsibility for medical conditions or diagnosed disabilities that are not listed on the returned form.*

***If necessary please consult your Principal well in advance of swimming lessons to discuss appropriate learning adjustments.*

I agree to inform the organisers before the scheduled departure of any change to my child's health and fitness. Where it is not practical to communicate with me, I authorise the school staff to consent to my child receiving such medical treatment as considered necessary

Stage Number	8. Water/Surf Wise
1. Beginner	9. Senior
2. Water/Surf Discovery	10. Jnr Swim & Survive/ Surf Stage 10
3. Preliminary	11. Swim & Survive/ Surf Stage 11
4. Water/Surf Introduction	12. Snr Swim & Survive/ Surf Stage 12
5. Water/Surf Safe	13. Wade Rescue/ Surf Stage 13
6. Junior	14. Accompanied Rescue/ Surf Stage 14
7. Intermediate	15. Bronze Star (pool only)

My child is going for Stage Number

Unsure please grade

My child has attempted this 'going for' stage three times in Department of Education classes without passing **Please attach copies of last three (3) Department of Education certificates.**

Signature: _____ Parent daytime phone number: _____ Date: _____
(Parent/Guardian)

