



Edenfield Road. Norden,
Rochdale. OL12 7QL
Telephone: (01706) 642469
Email: office@st-vincents.rochdale.sch.uk
6th September 2017

Dear Parent,

Class 4V – Mr. Babbs

I am writing to inform you that your child will be commencing swimming lessons on Tuesday, 12th September. These lessons will continue each Tuesday morning at Heywood Sports Village until and including Tuesday 7th November 2017. Please ensure that your child has a costume and towel for his/her lesson and an inhaler (if applicable).



There is no charge for the lessons or transport. Please ensure that your child arrives on time as the coach will leave promptly at 9.00 a.m.

Please complete and return the consent form overleaf.

Thank you for your support.

Yours sincerely,

Mr. S. Callaghan
Head Teacher



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Parent/Guardian Consent Form – School Swimming

Name Date of birth

Address
Postcode

Year Group School attending

Current swimming ability: **Non swimmer** **Able to swim 5m** **10 - 25m**
25m +

Does your son/daughter take part in our evening lesson programme stage.....

Does your son/daughter have any medical conditions or allergies? Yes

If yes, please specify

Does your son/daughter required to have medication with them when taking part in sport?

Yes No If yes, what kind?

Is your son/daughter considered disabled? Yes No

If yes what is the nature of the disability?

Does your child have special educational needs Yes No

Ethnicity: 1 White/British European 2 Black or Black British 3 Mixed
4 Asian or Asian British 5 Chinese or other

Full Name of parent/guardian Mr / Ms/ Mrs

Home phone number

Emergency phone number of another contact **Name:**

Mobile Phone number

• I agree to my son/daughter taking part in the activities of the swimming sessions*

Signed Date

Relationship to participant

THIS FORM WILL BE RETAINED IN CONFIDENTIAL FILES AND IS FOR USE IN EMERGENCIES ONLY

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Swimming is a compulsory requirement within the National Curriculum at Key Stage Two

