

21st October 2024

Dear Parent/Carer,

Swimming - Term 2 – Dickens Class

Dickens class will be having swimming lessons at Devizes Leisure Centre from **Tuesday 12<sup>th</sup> November to 17<sup>th</sup> December 2024**. Lessons are for 45 minutes and will take place between 9.15 – 10am.

**They will swim for 6 weeks as follows – 12<sup>th</sup>, 19<sup>th</sup>, 26<sup>th</sup> November and 3<sup>rd</sup>, 10<sup>th</sup> and 17<sup>th</sup> December 2024.**

Swimming forms part of the PE national curriculum, providing children with the opportunity to learn, or further develop, a crucial life skill. **A qualified & experienced swimming teacher will take the lessons, supervised by a qualified lifeguard and a member of Southbroom staff.**

The cost of swimming lessons is more than other subjects, as we need to hire the pool and pay for the instructors and lifeguard. **To help with the costs of swimming for Term 2, we ask for a voluntary contribution of £19.80. Please pay via the Arbor Parent Portal.**

**The swimming teacher would appreciate you completing the attached questionnaire to inform them about your child's swimming experience. This will help them to group the children in the initial lessons. In the interests of safety please don't over state your child's swimming experience.**

Please ensure all the clothes they wear and things they bring are clearly labelled with your child's name. Watches, jewellery and similar items **MUST** be left at home on Tuesdays as we are unable to take responsibility for items whilst your child is swimming.

Should your child have a medical condition likely to impact on their ability to swim, please indicate this on the attached reply form. Also, in the interests of safety, children **with long hair must wear a swimming hat**. Children with foot infections **MUST** wear a swimming sock, these are available to buy from the Leisure Centre and other sports retailers. If you wish your child to wear goggles, please indicate this on the reply slip.

Yours sincerely



Mr Gareth Bailey  
Headteacher

**Please complete & return this slip to the school office**

Childs Name: \_\_\_\_\_

Class – Dickens

I consent to

- my child taking part in swimming lessons at Devizes Leisure Centre;
- my child wearing goggles during swimming lessons (to be brought from home)

Signed (parent/guardian) \_\_\_\_\_

Swimming Experience questionnaire

Child's Name \_\_\_\_\_

Current Age \_\_\_\_\_ Class \_\_\_\_\_

What swimming experience has your child had?

What awards, if any, has your child achieved?

Does your child have any fears about water or swimming?  
If yes, please give details.

Does your child have any allergies or other medical conditions which may affect their swimming? If yes please give details.