



# IRRAWANG PUBLIC SCHOOL SWIMMING SCHEME



## 2022 SCHOOL SWIMMING SCHEME CONSENT FORM

I hereby consent to my son/daughter \_\_\_\_\_ of class \_\_\_\_\_ participating in the School Swimming Scheme classes to be held at Lakeside Swimming Pool from 24th October to 4th November 2022.

**Total cost to parents for 10 day program is \$60. Travel will be by BUS. The cost of the program has been subsidised by Irrawang Public School.**

In the event of injury or illness, I also authorise (on my behalf) the seeking of such medical assistance that my child may require. Special needs of my child of which you should be aware (eg. allergies, sensory impairment, etc):

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Signed:

Date:

Parent/Carers Name:

**Return this section and the attached medical form to the school with your payment (either partial or full) by Wednesday 18th October 2022.**

### Message to Parents/Caregivers

Arrangements have been made to include a Learn to Swim Program in our School Curriculum. **This year the cost of the program has been heavily subsidised by Irrawang Primary School, which has allowed us to reduce the cost of the 10 day program.** With ONLY 120 places available, priority will be given to students in Years 2, 3 & 4 followed by Years 5 and 6 to fill the spots.

The Department of Education and Communities School Swimming Scheme is an intensive learn to swim program, which develops water confidence and provides students with basic skills in water safety and survival. The Scheme is conducted over ten days. Each daily lesson is 45 minutes.

**Students who have not reached a satisfactory standard of water safety and survival skills, and are unable to swim 25m confidently unaided in deep water, are eligible to participate in the School Swimming Scheme. The Scheme focuses on all weak swimmers from Years 2 to 6, as well as students with special needs such as new arrivals in Australia and students with disabilities.**

Instruction will take place at Lakeside Swimming Pool, Raymond Terrace. The Scheme will continue **daily for two weeks** from 24th October to 4th November 2022 (Weeks 3 & 4 Term 4). There will be no charge for instruction. **The total cost for the 10 day scheme is \$60.00 which includes 10 pool entries and bus travel to and from the pool each day.**

**To secure your child's place in the program a small deposit should be paid and the remainder paid before 18<sup>th</sup> October 2022.**

#### Each child must bring:

- swimming costume
- a towel
- a hat
- a blouse or shirt
- warm clothing on a cool day.
- Sun screen

Where instruction takes place in an outdoor pool, it is recommended that students use adequate sun protection, eg. an SPF 30+ broad spectrum, water-resistant sun screen reapplied regularly. A T-shirt or rash shirt is also recommended (pool facility permitting). Students will be assessed during the School Swimming Scheme for all water safety skills without wearing goggles. If your child is eligible for the Scheme, please complete the attached permission note, medical form and return it with the money to your child's class teacher or the office as soon as possible.

*Gonno Bray*  
Swimming co-ordinator  
30 June 2022

*Stacy Mathieson*  
Principal

## Medical information form

The information provided is being obtained for the purpose of ascertaining relevant medical information, requirements and other health care related needs about your child who is currently enrolled at the school and is participating in school excursions, sporting activities or other educational or school activities conducted by or in conjunction with Irawang Public School.

It will be used by officers of the NSW Department of Education and Training to assist planning, to support students, and to minimise risks when conducting school excursions, sporting or other school activities.

Other persons or agencies that may be provided with this information include, but are not limited to, volunteers and members of external organisations who join with the school or are otherwise involved in the planning or delivery of the excursion, sporting or other school activity; and persons that may be called upon to provide health care treatment or other assistance during or as a consequence of such excursions or activities.

Provision of this information is not required by law. However, a failure to provide the information may mean that your child can not participate in a particular excursion or school activity. In such circumstances the school will make available a sound alternative educational experience.

Provision of this information will significantly assist the school in planning a safer educational activity. It will be stored securely. If you have any concerns about provision of this information, please contact the school principal to discuss further.

Student name: \_\_\_\_\_ Medicare number \_\_\_\_\_

Class: \_\_\_\_\_

### Parent or caregiver contact details

1. Name \_\_\_\_\_ Phone \_\_\_\_\_

2. Name \_\_\_\_\_ Phone \_\_\_\_\_

### Emergency contact(s) details (nominated by the parent or caregiver as alternate contact)

1. Name: \_\_\_\_\_ Phone \_\_\_\_\_

List existing medical conditions or illnesses (include asthma, diabetes, epilepsy, allergies etc.). Outline the treatment for each

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Medication(s) to be administered during the excursion. Include name of medication, instructions for administration, time of administration, and any possible reactions Medication(s) to be administered during the excursion. Include name of medication, instructions for administration, time of administration, and any possible reactions

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Name: \_\_\_\_\_