

# Axbridge Church of England First School Academy

Headteacher  
Mrs L Richardson BA (Hons)

e-mail: [Sch.018@educ.somerset.gov.uk](mailto:Sch.018@educ.somerset.gov.uk)  
[www.axbridgefirstschool.co.uk](http://www.axbridgefirstschool.co.uk)



Moorland Street  
Axbridge  
BS26 2BA  
Tel: (01934) 732391 Fax:(01934) 733360

7<sup>th</sup> November 2018

Dear Parents/Carers

## Swimming Lessons for Years 3 and 4

In January, Years 3 and 4 will commence a 10 week course of swimming lessons. This will begin on Tuesday 9<sup>th</sup> January 2018 and will continue each Tuesday until (and including) 20<sup>th</sup> March 2019.

Year 3 children will leave school at 1pm and arrive back at approximately 2.30pm. Year 4 pupils will leave at 1.30pm and will arrive back in time for end of school at approximately 3pm.

The children will be accompanied to Kings of Wessex pool in Cheddar by myself, Mr Shillabeer, Mrs Ingarfill and Mrs Lange. Joining us at the pool will be three trained ASA instructors.

The PTA has kindly given us a donation towards the cost of the transport, but there is also the cost of hiring the pool and having three instructors. Parents are therefore invited to make a contribution of **£10.00 for the whole term** (in a named sealed envelope) to help meet these additional costs. Unfortunately, if we do not receive enough contributions, we will have to cancel the lessons.

It is essential that the questionnaire, permission slip and the money are returned, in a sealed envelope, to your child's **class teacher by Friday 30<sup>th</sup> November.**

Yours sincerely

Kellie Nash  
Assistant Headteacher

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## AXBRIDGE CHURCH OF ENGLAND FIRST SCHOOL ACADEMY Swimming Lessons – Spring Term 2018

As parent/carer of ..... I have read, fully understood and am satisfied with the details supplied about the above mentioned activity and agree to my son/daughter taking part in it. I know of no medical reason why he/she should not participate.

I am aware that:-

- a) Except for visits abroad insurance arrangements are the same as for pupils in school, i.e. that the Academy only provides cover against proven or agreed negligence by the Academy and its employees;
- b) I should consider making my own insurance arrangements for personal accident cover for my son/daughter for school activities in the UK.

Signed ..... Date .....

I enclose the £10.00 voluntary contribution

Please return to your child's class teacher



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*Please complete this form so that we can place your child  
in the appropriate swimming group*

Child's Name .....

Class.....

*Please circle the appropriate answer to best describe your child's ability:*

- |                                    |            |           |
|------------------------------------|------------|-----------|
| • My child is a non-swimmer        | <b>YES</b> | <b>NO</b> |
| • My child can swim 5 meters       | <b>YES</b> | <b>NO</b> |
| • My child can swim 10 meters      | <b>YES</b> | <b>NO</b> |
| • My child can swim 25 meters      | <b>YES</b> | <b>NO</b> |
| • My child can swim 25 meters plus | <b>YES</b> | <b>NO</b> |

**Please state any medical conditions:** \_\_\_\_\_

*Please return this form to Miss Nash along with the permission slip*

