



Tyabb Railway Station Primary School  
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1<sup>st</sup> March 2019

## SCHOOL SWIMMING PROGRAM 2019 – **New Location**

Dear Parents,

This year’s school swimming program will take place in Term 1 at Casey Race, 65 Berwick-Cranbourne Rd, and Cranbourne East.

The program will run for one week. The students will participate in 4 x 45 minute lessons and 1 x 1 hour fun session (Inflatable & Water Slides)

**The date of this program is March 25<sup>th</sup> to March 29<sup>th</sup> 2019.**

The sessions will be run by trained swimming staff from Casey Race.

The cost will be **\$26.00 per child** for the 4x45 minute lessons and 1-hour fun session and bus to and from Casey Race each day.

**Please return permission slip and payment by Monday 18<sup>th</sup> March, late returns will not be accepted (also permission slips received without payment will not be accepted).**

Tyabb Railway Station has used the government contribution for swimming programs as well as the PE departments Sporting Schools funding to go towards swimming lessons making it cheaper for the students and their family. If you have CSEF, this can be used to put towards the cost of your child’s swimming lessons.

The students will be catching a bus to and from Casey Race each day. If any parents would like to help with their children’s class please let the classroom teacher know. Parents are also welcome to come and watch their children participate in their lesson.

**The times of the lessons are:**

**Miss Hill & Mrs Rogers class** 11.00am to 11.45am Monday – Thursday and 11am to 12pm Friday (fun session)

**Miss Bastow & Miss Amos class** 12.00pm to 12.45pm Monday – Thursday and 12pm to 1pm Friday (fun session)

**Mr W & Mrs Esler class** 1.15pm to 2.00pm Monday – Thursday and 1pm to 2pm Friday (fun session)

**Mrs Sommers**

**Physical Education & Sports Teacher**



**WHOLE SCHOOL SWIMMING PROGRAM 2019 PERMISSION FORM**

**Please note: an individual permission note is required for each student**

My child.....of Room .....

(Please circle) will, will not, be participating in the Swimming Program.

Please find cash payment of \$ \_\_\_\_\_  Please use my CSEF/Credit (please check with the office)

I have transferred \$ \_\_\_\_\_ using my Bpay details (*contact office for code*)

I authorize the teacher in charge to consent, where it is impracticable to communicate with me, to my child receiving such medical and/or surgical treatment as is deemed necessary.

Parent/Guardian’s full name:.....

Signed ..... (*Parent/Guardian*)

Phone Number on the day:.....Date:.....