

## **Gainsborough Primary and Nursery School**

Belgrave Road, Crewe, Cheshire CW2 7NH 201270 685328 www.gainsborough.cheshire.sch.uk

Head of School: Miss N Hough

Dear Parent

6<sup>th</sup> September 2018

Swimming lessons for Class 7 will commence on <u>Tuesday 11<sup>th</sup> September 2018</u> for 12 weeks. (11<sup>th</sup> Sept, 18<sup>th</sup> Sept, 25<sup>th</sup> Sept, 2<sup>nd</sup> Oct, 9<sup>th</sup> Oct, 16<sup>th</sup> Oct, 23<sup>rd</sup> Oct, 6<sup>th</sup> Nov, 13<sup>th</sup> Nov, 20<sup>th</sup> Nov, 27<sup>th</sup> Nov, 4<sup>th</sup> Dec)

The children will be travelling by coach to Crewe Lifestyle Centre accompanied by members of Gainsborough staff, leaving school at 12.15pm and returning by approximately 2.30pm. The lessons will be taught by a qualified instructor and there will be no charge to parents as school will fund the costs.

Please ensure that your child brings their swimming kit, towel and a coat.

Please complete and return the slip below to school before the first lesson, making us aware of any known medical conditions and to acknowledge that your child will be out of school on those dates. Please do not send your child with goggles unless they are required for medical reasons, indicating the reason below.

If there are any queries, please do not hesitate to contact us at school.

Many thanks

Year 3 Teachers

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	GAINSBOROUGH PRIMARY AND NURSERY SCHO	DOL
	CLASS 7 SWIMMING 2018	

I acknowledge that my child..... Class ...... Class ....... Class ....... will be out of school on Tuesday afternoons starting from Tuesday 11<sup>th</sup> September 2018 for swimming lessons.

My child does/does not have any specific medical problems. Please note the following medical conditions

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I wish for my child to wear swimming goggles  $\ \square$ 

The medical reason for this is .....

Signed...... Parent/Carer

