



# SKEGBY JUNIOR ACADEMY

**Principal:** Mrs P Marples

**Deputy Principal:** Miss H Nagelsztajn

Ash Grove, Skegby, Notts, NG17 3FH

**Telephone:** 01623 460329

**Email:** [admin@skegbyjunioracademy.org](mailto:admin@skegbyjunioracademy.org)

**Website:** [www.skegbyjunioracademy.org](http://www.skegbyjunioracademy.org)

## Year 6 Swimming - Summer Term 2019

Dear Parents/Carers,

Our Year 6 swimming programme begins on **Monday 8<sup>th</sup> July**. We will go swimming every morning for the following two weeks except for Friday 12<sup>th</sup> July (last day will be Wednesday 17<sup>th</sup> July). We will be leaving school 1.00pm and returning at 2.45pm.

Girls must wear a full **swimming costume** (no bikinis please) and must have **long hair tied back off their face**. Their costumes must be plain and not have any 'accessories' attached, e.g. tutus.

Boys must wear **swimming trunks** or **close fitting swimming shorts (without pockets) that are above the knee** - the instructors at Lammas are very strict about this and will not allow boys to swim with baggy shorts or shorts below the knee.

**All children must also bring a long sleeve top and a pair of trousers each day to swim in as part of their lessons.**

Children who need inhalers **must** bring them. Swimming and the humid pool environment may lead to a child needing to use their inhaler. As part of our risk assessment, if a child does not bring their inhaler they will not be allowed to go.

All children will need **a towel**. We recommend that the children do not wear goggles, but if your child needs them for a medical reason, we will need written consent from you for the instructors at the baths to make a decision if they can be worn.

**CAN YOU HELP?** Due to the number of children swimming, we are looking for adult volunteers to come with us to support the children: adult ratio that we need. If you are available every afternoon for the two weeks (8<sup>th</sup> July-17<sup>th</sup> July) and are willing to help, please specify on the letter attached. Thank you ☺

Please complete the form on the next page and return to Miss Graney as soon as possible.

Name of child: \_\_\_\_\_

Please can you tick a box below to describe your child's swimming ability:

- My child has not been swimming before.
- My child uses a swimming aid (float) to swim.
- My child has little swimming experience (on holiday).
- My child has had swimming lessons before.
- My child is a very experienced swimmer (they have achieved 25m or above).

Any other information regarding swimming ability (including what certificates they have achieved):

---

---

---

Can you help us?

\_\_\_\_\_ (name of adult) can help support each session of swimming from the 8<sup>th</sup> July-17<sup>th</sup> July.

If you or your child has any concerns or questions about the swimming programme, please contact me.

Many thanks, Miss Graney