



**Archbishop Courtenay
Church of England
Primary School**

Eccleston Road
Tovil
Maidstone
Kent
ME15 6QN

☎ 01622 754666
✉ office@abc.aquilatrust.co.uk
🌐 www.archbishopcourtenay.org.uk
Headteacher: Mrs S Heather
Chair of Governors: R O'Connell

17th March 2022

Dear Parents and Carers of children in Year 6 Holbein Class,

SWIMMING LESSONS

We have arranged swimming lessons for all Year 6 children in Holbein Class as part of our PE curriculum at Mote Park Leisure Centre during Term 5. The children and staff will leave school at 2.00 pm and travel by coach to the Leisure Centre for lessons commencing at 2.30 pm but will return to school by 3.30/3.40 pm. The dates are as follows:

Monday 25th April 2022

Monday 9th May 2022

Monday 16th May 2022

Monday 23rd May 2022

Monday 13th June 2022

We are asking for a voluntary contribution of £3.00 per week or £15.00 in full for the 5 weeks payable from the first session which can be paid through Parent Pay.

Please ensure that your child brings appropriate swimwear (trunks or shorts for boys, one piece costume for girls - **no bikinis**), a towel, goggles, swimming cap if required and spare underwear in a named bag. If you have any queries please do not hesitate to contact your child's teacher or the school office.

Please indicate below how confident a swimmer your child is to enable the swimming instructors to organise the groups.

Please return the permission slip below by Friday 25th March 2022.

Year 5 and 6 Team





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TO: ARCHBISHOP COURTENAY PRIMARY SCHOOL

CHILD'S NAME:..... YEAR 6 – HOLBEIN CLASS

I give permission for my child to travel by coach to attend swimming lessons at Maidstone Leisure Centre. Should the need arise I give consent for my child to receive any urgent medical attention and understand that this may include an anaesthetic and/or blood transfusion

I do/do not give permission for my child to walk home alone after swimming at 3.30/3.40 pm

My child cannot swim ☐

My child can swim a little (without armbands) ☐

My child can swim 25m ☐

Signed:.....

Date:.....

Parent/Carer

EMERGENCY CONTACT	NAME	TELEPHONE NUMBER
Contact 1		
Contact 2		

You may withdraw your consent at any time by informing the school in writing.

