Mrs Sarah Moss, Headteacher

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EASTRY CHURCH OF ENGLAND
PRIMARY SCHOOL
COOKS LEA
EASTRY
SANDWICH
KENT
CT13 0LR

13th May 2024

Dear Parents and carers,

## **Swimming for Year 3**

I am pleased to confirm details of swimming lessons for Year 3 for Term 6.

Lessons will take place on Thursday mornings from 10.00am to 11.00am (1 hour lesson) for 6 weeks. The first lesson will be on Thursday, 6<sup>th</sup> June with the last lesson being on Thursday, 11<sup>th</sup> July. The children will leave school at approximately 9.20am travelling by coach to the Duke of York's Royal Military School. The children will be back in school for lunch.

In order to keep costs to a minimum, Year 3 will also be joined by some children from Year 4 who took part in swimming last year and would benefit from some additional lessons. They will be divided in to 2 groups, based on ability, each with their own swimming coach.

We have looked at various options to enable us to ensure that children continue to learn and improve this essential skill, to meet our statutory obligations and to keep the costs as minimal as possible. By providing a 1 hour lesson over a shorter period of time, and combining lessons with two year groups, we have been able to reduce the cost considerably.

The costs will be £6 per 1 hour lesson or £36.00 for the 6 week course (6 hours) being a considerable reduction than in previous years. Voluntary contributions towards the cost of lessons can be made by cash or cheque payable to Eastry Church of England Primary School. Alternatively, payment can be made via BACS to;

National Westminster Bank Sorting Code 60-60-08 Account Number 83294147 Reference Child's name

Please complete and return the consent slip attached by Wednesday, 22<sup>nd</sup> May.

Kind regards

Sarah Moss Headteacher

## **Consent Form**

## Year 3 - Thursday, 6<sup>th</sup> June to Thursday, 11<sup>th</sup> July

My child	Year	MAY participate in the above
swimming lessons		
□ I confirm I will make a voluntary contril	bution of £6.00 a w	eek for lessons
□ I confirm I will make a voluntary contril	bution of £36.00 fo	r lessons in full
Please make cheques payable to Eastry C National Westminster Bank Sorting Code Account No. <b>83294147</b> Account Name Eastry CEP School Please quote your child's name as the re	60-60-08	payment can be made to;
Any allergies? YES/NO* Please specify:		
I agree to my son/daughter* receiving medical and surgery treatment, including necessary by the medical authorities presented.	ng anaesthetic or	
Signed:	Name:	
Contact Telephone:(Parent/Guardian) *Please delete as appropriate		