



THORNLANDS STATE SCHOOL

Growing the Whole Child

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Principal Robyn Wilton

28/01/2022

Dear Parents/Guardians

In Term 1, children from Years 1 through to Year 6 will be involved in swimming lessons across the road at our school swimming pool.

Our swimming program follows the Australian Curriculum and is designed to provide comprehensive lessons in swimming and water safety. The aim of the program is to increase the swimming and water safety skills of all Australian children in order to prevent drowning and increase participation in safe aquatic activities.

In order to cover the costs of the qualified swim teachers, families will be charged \$ per child. This is cheaper compared to \$14 per lesson at private after school lessons, or \$50 per child for a block of 6 lessons for schools without a pool who have to travel to their local pool.

Please read information about Swimming Caps for 2022

It is **compulsory** for all children to wear a **swimming cap**. Hair causes problems with the filtration system and makes swimming for students with long hair difficult. If you require a cap they can be purchased from Sue Aitkin (Pool Coordinator) across the road at our school pool.

More than 30% of our Year 1's are 'learning' swimmers. They respond and improve more quickly with more 'one on one' instruction. Parents, if you can spare some time during the week when your child is swimming to help our instructors in the pool during their lessons, this would be greatly appreciated. Could you let your class teacher know if you able to help out. Please note, you will need to be fully vaccinated and provide proof of this to volunteer.

- Start Date →** Monday 14th of February (Week 2, Term 1)
- Finish Date →** Friday 25th March
- Cost →** \$ 14 per child
- What to Bring →** Swimmers (Board Shorts are ok), Towel, spare clothes, plastic bag to put wet gear in, goggles if needed, sun-safe rash shirt, swimming cap (compulsory). (No Bikini's)
Please put your child's name on their swimming gear as we had a lot of unclaimed gear in past years.

Payment and Forms DUE BY FRIDAY 11th Feb

Please complete the attached permission/medical details form and return with the money to the office in an envelope with your child's name and class on the front. The office is open for the collection of money Tuesdays and Thursdays from 8:30am till 10:00am. Alternately invoices will be emailed so you can pay online using the BPoint system.

Kind Regards

Aaron Tunj
PE Teacher

Robyn Wilton
Principal



Activity Consent Form – Swimming Lessons 2022

Privacy Statement

The Department of Education is collecting the personal information in this form in order to:

- obtain consent for the named child/student to participate in the named off-site activity;
- help coordinate the off-site activity;
- respond to any injury or medical condition that may arise during or as a result of the off-site activity; and
- update school records where necessary.

Where applicable, the information is being collected in accordance with section 102 of the Education and Care Services National Regulations and the Education and Care Services Regulation 2013 (Qld).

The information will only be accessed by authorised departmental staff and stored securely. The information will be dealt with in accordance with the confidentiality requirements of, as applicable, section 426 of the Education (General Provisions) Act 2006 (Qld), the Information Privacy Act 2009 (Qld), and/or the Privacy Act 1988 (Cth). The information will not be disclosed to any other person or agency unless we have your consent or we are required or authorised by law to do so e.g. in compliance with relevant [Queensland Chief Health Officer's Directions](#).

Student's Name: _____ **Class:** _____

- **The inherent risk level for Swimming is high.**
- Students will cross South Street under supervision of an adult to access the school pool.
- Students will be taught and supervised by qualified swimming teachers
- Students are required to have a swimming cap, swimming shirt/ rashy, sunscreen, appropriate togs (boardshorts ok) and goggles (if desired).
- All information relevant to students with medical requirements (eg. conditions such as asthma, allergies or anaphylaxis) need to be detailed on the attached medical form.

Activity risks and insurance

Please note that the Department of Education does not have personal accident insurance cover for children/students. If your child is injured as a result of an accident or incident while participating in the activity, all costs associated with the injury, including medical costs are the responsibility of the parent/carer. Some incidental medical costs may be covered by Medicare. If you have private health insurance, some costs may also be covered by your provider. Any other costs must be covered by parents/carers. It is up to all parents/carers to decide the type/s and level of private insurance they wish to arrange to cover their child. Please take this into consideration in deciding whether or not to

Activity Consent

By signing this form, I agree to the following statements:

- I have read all of the information contained in these forms in relation to the activities (including any attached material) and I am aware that the Department of Education, Training and Employment does not have personal accident insurance cover for students.
- I give consent for my child, _____ (print child's name) in class _____ (print class details), to participate in swimming lessons as part of their PE lessons this term. I acknowledge that swimming has been assessed as a high risk activity.
- I give permission for my child to cross South Street via the zebra crossing under Teacher supervision to and from their swimming lesson.
- In the event of an accident or illness, I authorise school staff to obtain or administer any medical assistance or treatment my child may reasonably require, including contacting my child's doctor.

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- I have provided the school all relevant and up to date details relating to my child's medical or physical needs.
- I accept liability for all costs incurred in obtaining such medical assistance or treatment (including any transportation costs) and undertake to reimburse the State of Queensland (via the Department of Education, Training and Employment) the full amount of any costs incurred on my child's behalf.

Any other relevant medical history that may prevent or affect their participation in the carnival. Please detail below.

Please attach further pages if you require additional space.

Please note, as per Education Queensland Policy, children with serious pre-existing medical conditions or injuries will require medical clearance to participate in medium and high risk activities. Please speak to your child's teacher or administration if you require further information.

My child's previous swimming experience (circle most relevant)

No Prior Experience --- Beginner --- Some Experience --- Previous Lessons

Independent in the Water --- Confident --- Can Swim 25m --- Squad Training

Additional Medical Details

Parent/s Contact Number:

Parent 1 → _____ Parent 2 → _____

STUDENT MEDICAL HISTORY AND AUTHORISATION

My child has been immunised against (please show year if known):

Date of last tetanus injection: _____ Medicare N^o: _____

My child suffers from asthma? _____ Medication available: _____

My child is known to be allergic to: _____

Medication required: _____

The school has been provided with a *current* emergency health or management plan in relation to these allergies/ anaphylaxis: **Yes** **No**

Parent/Carer Name: _____ (Please Print)

Parent/Carer's Signature: _____ Date: _____ / _____ / _____

