**School Swimming Lessons commencing Wednesday 16 September 2015**

Childs name: ……………………………………………………………………..

Childs class no: ………………………………………………………………….

How far can they swim? ………………………………………………………

If applicable please indicate the most up to swimming certificate achieved:

……………………………………………………………………………………..

**Please return to the school office by Monday 14 September 2015**