

ULCOMBE CHURCH OF ENGLAND PRIMARY SCHOOL

Mrs Olenka Parsons
Head of School

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... Learning for Life ...

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16th May 2025

Dear Parents/Carers of Year 6 children,

SWIMMING LESSONS

For Term 6, we will be taking Year 6 pupils swimming. Listed below are the dates swimming will take place:

Term 6 (5 weeks) - £15
Thursday 5th June
Thursday 12th June
Thursday 19th June
Thursday 26th June
Thursday 3rd July

The cost of each swimming session is **£3.00**. We have had to increase the price to cover the increased costs of the minibus and staffing. We are using Sutton Valence School as the venue with Aspire staff, who are qualified swimming instructors, teaching the children. These members of Aspire staff are fully trained instructors and life guards.

We will be using the school minibus which also keeps the costs down for you. Swimming can be paid in advance for the term by cash or cheque made payable to Ulcombe CE Primary School. Alternatively, payments can be made weekly – preferably on a Thursday (the day swimming takes place).

I appreciate that families sometimes have difficulties meeting these costs and should this be a problem please not do hesitate to contact me. Pupils who are currently in receipt of free school meals are eligible for support to cover the contribution. Please let me know in writing (via email) if you require assistance with covering the costs. If you have any queries with the above please do not hesitate to speak to me or Mrs Rumsey in the office.

Please can you also complete and return the attached consent form. **This is required to allow your child to attend swimming lessons.** Please ensure this is returned to the School Office no later than **Friday 23rd May '25**.

Yours faithfully

Olenka Parsons

Olenka Parsons
Head of School

Ulcombe CE Primary is part of the ASPIRE Federation



SWIMMING CONSENT FORM

I hereby give consent for my child
to attend swimming lessons at Sutton Valence School.

In the case of emergency, the best number to contact me on Thursday afternoons is:

.....

In the event of my son/daughter requiring hospital treatment and Ulcombe Church of England Primary School being unable to contact me, I give consent to the member of staff accompanying my child to approve the application of any emergency treatment on hospital advice for the well-being of my son/daughter.

My child is allergic to:

.....

Signed:

Name:..... Date:

Please complete and return by **Friday 23rd May '25.**