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5 January 2016

Dear Parents of P3 Pupils,

2016 P3 SWIMSAFER PROGRAMME

The P3 SwimSafer Programme is a highlight of our school's Physical Education curriculum experience. Through SwimSafer, pupils will develop water confidence, understand the principles of water safety, and learn techniques to prevent drowning. In addition, SwimSafer builds our pupils' physical and mental robustness and cultivates perseverance and resilience.

The P3 SwimSafer Programme comprises 8 sessions to be conducted over 4 weeks in Term I. Details are as follows:

Dates and Times:	Session 1 (Wed, 13 Jan 2016) Session 2 (Fri, 15 Jan 2016) Session 3 (Wed, 20 Jan 2016) Session 4 (Fri, 22 Jan 2016) Session 5 (Wed, 27 Jan 2016) Session 6 (Fri, 29 Jan 2016) Session 7 (Mon, 1 Feb 2016) Session 8 (Wed, 3 Feb 2016)	8.30 a.m. to 11.00 a.m. <ul style="list-style-type: none"> • Pupils will report to school as usual for lessons at 7.45 a.m. • Pupils will board the buses headed for Woodlands Swimming Complex at 8.15 a.m. • Swimming Lessons will be from 8.30 a.m. to 10.00 a.m. • Pupils will return to school after the swimming lesson. • Pupils will be dismissed from school at the usual time.
Venue:	Woodlands Swimming Complex	
Cost:	No payment is required from pupils. The programme fee is fully borne by the Ministry of Education (MOE) and Sport Singapore (SportSG)	
Notes:	<ul style="list-style-type: none"> • On the day of the swimming lesson, every P3 pupil is expected to report to school in his/her swimming gear underneath his/her PE attire and in his/her school shoes and socks. • For girls, the swimming gear is recommended to be one-piece instead of two-piece. • Every P3 pupil is expected to bring the following items on the days of the programme: <ul style="list-style-type: none"> ○ Goggles ○ Towel ○ Slippers ○ Undergarments ○ Water Bottle ○ Plastic Bag ○ Light Refreshments (e.g. a sandwich or a bun) • The school will arrange for two-way transport for pupils to ferry them from school to the swimming complex, and back. 	

Attached is a form for you to indicate your consent for your child to participate in the P3 SwimSafer Programme. Please indicate if your child has already attained any swimming awards/certification so that the programme can be catered to your child's swimming ability. Do attach a copy of your child's certificates of attainment when submitting the consent form. The completed consent form is to be returned to the Form Teacher by Thursday, 7 January 2016.

Should you need clarification about the P3 SwimSafer Programme, please contact Mr Bobby Chan, HOD/PE&CCA at (tel) 63654490.

We look forward to your strong support for this opportunity to equip your child with swimming skills, develop his/her water safety habits and nurture his/her confidence. We are confident too that the P3 SwimSafer Programme will provide a shared experience with many best moments for our Riverians! Thank you for your partnership in education!

Best regards,

Mrs Sharon Siew
Principal

Mr Bobby Chan
HOD/PE&CCA

RIVERSIDE PRIMARY SCHOOL
2016 P3 SWIMSAFER PROGRAMME: CONSENT FORM

*Please tick the relevant boxes and provide the requested information.
Please return the completed form to the Form Teacher **by Thursday, 7 January 2016.***

Name of Pupil: _____

Class: P3- _____

PARENTAL CONSENT

I consent to my child's/ward's participation in the P3 SwimSafer Programme on the days stated below:

- Session 1 (Wed, 13 Jan 2016)
- Session 2 (Fri, 15 Jan 2016)
- Session 3 (Wed, 20 Jan 2016)
- Session 4 (Fri, 22 Jan 2016)
- Session 5 (Wed, 27 Jan 2016)
- Session 6 (Fri, 29 Jan 2016)
- Session 7 (Mon, 1 Feb 2016)
- Session 8 (Wed, 3 Feb 2016)

I do not consent to my child's/ward's participation in the P3 SwimSafer Programme.

Reason: _____

PUPIL'S PERSONAL PROFILE

What is your child's swimming ability and experience?

My child knows how to swim.
Please state the swimming award/certification that your child has attained, e.g. Swimsafer Level 1-5, Bronze/Silver/Gold Award) and submit a copy of the certificates:

My child does not know how to swim.

My child is afraid of water.

Does your child have any allergy?

Yes (Please specify): _____

No

Does your child have any medical condition?

Yes (please specify): _____

No

Name of Parent/Guardian: _____

Contact Number: _____

Signature and Date: _____