Dear Parents,

**Years 3 - 6 Students Swim Trials for 2015 Swim Team**

Trials for the 2015 Thomas Mitchell Primary School Swim Team will be conducted on **Wednesday 4th** and **Wednesday 11th February** 2015 from 4.00pm to 5.00pm at Doveton Pool in the Park, Doveton.

The cost will be $2.20 per child per training session and is payable direct to Doveton Pool in the Park.

If your child turns 9, 10, 11, 12 or 13 years of age this year (during 2015), and is capable of swimming 50 metres in any of the strokes of freestyle, backstroke, breaststroke or butterfly, please bring them to try out for our swim team. We didn’t have a large team in 2014, so let’s see if we can have more students try out for this year!

If you are unable to attend trials, then a recent time for an event countersigned by a swimming teacher or coach is acceptable.

The team will be selected on the basis of times achieved. If selected, your child will be notified that they have qualified for the 2015 swim team.

The District Swimming Carnival will be held on **Thursday 26th February 2015**.

If you are bringing your child to our trials please fill out the reply slip below.

Please note that you will be required to transport your child to and from the venue, and to remain for the duration of the trials (to finish at 5pm).

If you have any questions or concerns please contact Miss Goder.

Yours sincerely,

Olivia Goder
Physical Education Coordinator

John Hurley
Principal

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**THOMAS MITCHELL PRIMARY SCHOOL**

**Years 3 - 6 Students Swim Team Trials for 2015 Swim Team**

Child's Name: .......................................................... Class: ........................................

Age as at 31st December 2015: .................................

My child is interested in trying for the swimming team. My child will be in attendance on: -

- [ ] Wednesday, 4th February  ................................................ Please
- [ ] Wednesday, 11th February ................................................... tick

I understand that I am responsible for the transport and supervision of my child at the venue.

Parent/Guardian signature: ........................................ Date: ........................................