Dear Parents,

Years 3 - 6 Students Swim Trials for the 2017 Swim Team

Trials for the 2017 Thomas Mitchell Primary School Swim Team will be conducted on Tuesday 7th and Thursday 9th February 2017 from 4.00pm to 5.00pm at Doveton Pool in the Park, Doveton.

The cost will be $2.10 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 during 2017, and is capable of swimming 50 metres in any of the strokes of freestyle, backstroke, breaststroke or butterfly, under the minimum requirement time of One minute and twenty seconds please bring them to try out for our swim team. We didn’t have a large team in 2016, so let’s see if we can have more students try out for next 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 the best times achieved under the minimum requirement time of one minute and twenty seconds. If selected, your child will be notified that they have qualified for the 2017 swim team.

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 Teacher

John Hurley
Principal

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THOMAS MITCHELL PRIMARY SCHOOL

Years 3 - 6 Students Swim Team Trials for 2017 Swim Team

Child’s Name: .........................................................  Class: .....................................................

Age as at 31st December, 2017...........................................

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

Tuesday, 7th February  □  )  Please
Thursday, 9th February □  )  tick

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

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