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PRINCIPAL | Andrew Campbell PGDip. Org. Behaviour, B.Ed., Dip.T.

October 2023

Dear Parents and Caregivers

Free After School Water Confidence Programme

Your child's teacher has suggested that _____ may benefit from participating in our free after-school water confidence programme. This programme starts **Friday, 20th October** (week 2).

The tutor for this programme is Diane Cooper, a trained swimming teacher.

If you would like your child to participate in this water confidence-building programme, please complete the slip below and return it to the 'Frog Box' at the 'Smiley Window' by **Tuesday, 17th October**.

As there are limited spaces, we will number the forms as they come in and contact you if your child has a place in the programme.

Programme Information:

What:	Water Confidence Activities
When:	Fridays after school.
Starting Date:	Friday, 20th October (Week 2)
Finishing Date:	Friday, 1st December (Week 8)

Time: ½ hour sessions:

3:00 - 3:30 pm	(Special programme)
3:30 - 4:00 pm.	(Junior)
4:00 - 4:30 pm.	(Middle)
4:30 - 5:00 pm.	(Senior)
5:00 - 5:30 pm.	(Senior)

This programme has proven to be very popular in the past. It has helped to give kids the kick-start they need to participate fully in our regular class swimming programme and help them be more confident in and around water during the summer months.

Participants **must come to every session unless they are sick**. The lessons will be held each Friday, weather permitting in Term 4 and will run for 7 weeks. The classes will be limited to **6** students per session and are for beginner/non-confident swimmers only.

Regards

Diane Cooper

Kiwi Sports Coordinator



dreamstime.com

Free After School Water Confidence Programme
Friday sessions:20th October - 1st December

I would like my child to participate in the after-school water confidence programme. Yes / No

I understand I will need to bring my child to the school pool and collect them at the end of the lesson.

Child's name: _____

Age: _____ Year: _____ Room: _____

Parent / Caregivers name _____

Signed: _____ (Parent/Caregiver)

Contact Phone Number: _____

Email: _____