Small Schools Swimming Carnival
Monday 15 February 2016

Dear parents

To assist us to place students into races, please provide the following information.

My child _____________________________________________ can confidently freestyle:

☐ 50 meters
☐ 25 meters
☐ Across the shallow end of the Olympic pool
☐ None of the above

Novelty events will run for the less confident and non-swimmers.

Name of parent: _____________________________________________

Signature: ____________________________ Date: _______

Please return the completed slip to school as soon as possible or by Tuesday 9 February 2016.

Thank you

Lyn Eacott
Principal