



Lysterfield Primary School

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11 September, 2017



Prep, Year 1 & Year 2 Swimming Program

This year's swimming program will take place from **Monday 20th November to Friday 1st December** at the Paul Sadler Swimming Pool. The program will be undertaken **over ten sessions**, i.e. five sessions in the first week and five sessions in the second week (**Monday – Friday each week**).

In order to finalise bookings for the program and set the final cost, we will need to establish the number of children attending. *(As an indication, the cost for this program last year which was an 8 day program was \$81.00 per student.)* The exact amount will be able to be established once final numbers are confirmed. At this stage, if you wish your child to participate in the swimming program we are asking for a **non refundable deposit of \$20 by Monday 18th September.**

Instalment payments will follow on dates listed below. Instalment amounts will be advised once the final costing has been completed.

Instalment 1	Thursday 12 th October
Final Payment	Thursday 9 th November

Once you have returned the slip below and paid the deposit, a partial refund for the balance may only be given with the provision of a Medical Certificate & approval by the Principal. Please note that partial refunds are also dependent on final costs incurred.

Please complete the form attached and return to school with any money by Monday 18th September 2017.

If your child IS NOT attending the swimming program, please indicate this on the form attached and return it to school by Monday 18th September 2017.

Daniel Thomas
PE/Specialist Co-ordinator

**LYSTERFIELD PRIMARY SCHOOL
2017 PREP – YR 2 SWIMMING PROGRAM**

Please return to school no later than Monday 18th September 2017.

My child _____ in Grade _____

Will be participating in the 10 day swimming program from 20/11/17 – 1/12/17 inclusive & I enclose the deposit as indicated below.

I am aware that this deposit is **non refundable**.

Will not be participating in the swimming program



Signature of Parent/Guardian: _____

Date:...../...../2017

*****If you have indicated your child will be participating in the swimming program please complete section below.**

() I enclose \$..... cash / cheque / eftpos / slip re deposit payment
(please circle)

() I have paid the deposit via Qkr!

2017 Prep– Year 2 Swimming Program Credit Card Payment Slip
(American Express & Diners Club not accepted)

Amount Payable: \$	Please debit my: <input type="checkbox"/> Visa Card <input type="checkbox"/> Master Card
Name of Cardholder:	Signature:
Card Number:	Expiry Date: ____ / ____ Month Year
Card Check Value: <i>(3 digit number on back of card)</i>	