

October 2019

Dear Parents / Guardians:

On October 24th, November 7th and 14th, 2019, the Grade 3 students will participate in the Swim to Survive Program at Henderson Pool in Amherstview.

The Swim to Survive Program has been developed to ensure that Grade 3 students in Ontario learn basic survival skills and could survive an unexpected fall into deep water. Students will learn to roll into deep water, tread water for 1 minute and swim 50 metres.

This program is offered free of charge for all students.

We will board the bus at 9:15, and return to school around 11:30.

Students will need to bring a swim suit and towel.

Please complete and return the Permission Form and Inherent Risk Form.

Sincerely,
Mrs. Boyce and Mrs. Hamilton

Swim to Survive - October 24th, November 7th, 14th

I give my child, _____, permission to participate in the Swim to Survive Program.

Parent/Guardian Signature: _____

The school should be made aware of any special health conditions which might impact on the progress or welfare of students while they are on this activity. Please specify any relevant information below.

LIMESTONE DISTRICT SCHOOL BOARD

INHERENT RISK

NOTE TO PARENTS AND STUDENTS

The Limestone District School Board is arranging the Swim to Survive
Program to be held on or about _____.

THIS FORM MUST BE READ AND SIGNED BY EVERY STUDENT WHO WISHES TO PARTICIPATE AND BY A PARENT OR GUARDIAN OF A PARTICIPATING STUDENT

ELEMENTS OF RISK

Educational activity programs, such as Swim to Survive which is being offered, involve certain elements of risk. Accidents may occur while participating in these activities. These accidents may cause injury. Without limiting the generality of the foregoing, a few examples of the type of accidents which one is at risk of having occur while swimming are:

1. all risks associated with swimming in an indoor/outdoor
2. supervised pool at a local community centre
- 3.

These accidents result from the nature of the activity and can occur without any fault on either the part of the student, or the School Board or its employees or agents, or the facility where the activity is taking place. By choosing to participate in the activity, you are assuming the risk of an accident occurring.

The chances of an accident occurring can be reduced by carefully following instruction at all times while engaging in the activity.

The school should be aware of special health conditions which might affect the progress or welfare of the students while on this activity. Please specify this information below, with comments or recommendations.

ACKNOWLEDGMENT

I HEREBY ACKNOWLEDGE AND ACCEPT THE RISKS INHERENT IN THIS ACTIVITY AND ASSUME RESPONSIBILITY FOR MY OWN PERSONAL HEALTH, MEDICAL, DENTAL AND ACCIDENT INSURANCE COVERAGE.

Signature of Student: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____

PERMISSION

I give _____ permission to participate in the _____
_____ to be held on or about _____.

Signature of Parent/Guardian: _____ Date: _____