



Court Lane Junior School  
Hilary Avenue,  
Portsmouth, Hampshire,  
PO6 2PP

Head Teacher: Mrs Judith Ramshaw

023 9237 5444 **T**

admin@courtlanejnr.portsmouth.sch.uk **E**

http://www.cljs.co.uk **W**

5<sup>th</sup> September 2019

Dear Parents,

We are delighted to say that swimming arrangements have been made for all our Year 5 pupils. Lessons, with specialist swimming teachers, will take place every afternoon for one week between 1pm – 3pm. Each class will receive an hour session per afternoon. Children will be individually assessed in accordance with the Primary National Curriculum.

**Mercury & Neptune dates will be 16<sup>th</sup> – 20<sup>th</sup> September 2019**

Mercury class will leave school by 12.30pm for their lesson to begin at 1.00pm. Neptune class will leave school at 1.30pm for their lesson to begin at 2.00pm, Neptune will return to school by 3.30pm approximately.

**Jupiter & Venus dates will be 23<sup>rd</sup> – 27<sup>th</sup> September 2019**

Jupiter class will leave school by 12.30pm for their lesson to begin at 1.00pm. Venus class will leave school at 1.30pm for their lesson to begin at 2.00pm, Venus will return to school by 3.30pm approximately.

We will be walking to and from the swimming pool at the Oasis Centre at Queen Alexandra Hospital. The children will need to have a swimming costume/trunks, swimming hat, (goggles are optional). Floats and woggles/noodles will be provided at the pool. Please label your child’s belongings.

If you are able to walk to and from the pool with your child’s class please fill in the slip below, any help would be most welcome. Please complete the permission slip below giving permission for your child to attend.

Yours sincerely

Mrs Thompson  
Year 5 Leader

✂: .....

**Swimming (Year 5)**

Child’s Name: .....

Class.....

I give permission for my child to take part in swimming lessons at the Oasis Centre Queen Alexandra Hospital.

The days I will be available to help are:  Monday  Tuesday  Wednesday  Thursday  Friday

Your Name (Capitals please) ..... Contact number: .....

Signed ..... (Person with parental responsibility)