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August 2024

## **SWIMMING - YEAR 4**

Dear Parent/Carer

Please tick to indicate which category your child falls in	to regarding their swimming	ability.
Level 1 – Never been swimming before		
Level 2 - Has been swimming but doesn't feel confident	t	
Level 3 - Can put their face in the water and move arou	nd	
Level 4 - Can kick their legs using a float		
Level 5 - Can kick their legs and move their arms for 5-	10 metres without a float	
Level 6 - Can swim confidently over 10 metres		
Please hand this form back to your school teacher.		
Yours sincerely		
Year 4 Teachers		
%REPLY SLIP - Swimming Year 4 - Autumn/Winter 202		
SignedParent/Guardian	. Date	
Mobile Phone number	This is a new number	
Child's Name (Please PRINT)		
Class		

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