February 12, 2020

Dear Parent/Guardian,

One of the objectives of our physical education program at Swallow School is the development and maintenance of cardiovascular fitness for all students. We attempt several different weekly activities to accomplish these goals. However, because some of the traditional forms of aerobic exercise are not always appealing to all students, we are constantly striving for new and different means to meet these objectives. Roller skating is a great source of exercise and is currently popular with students. Skatetime School Programs of Morrison, Illinois offers a skating program which allows schools to keep roller skates at their facility and skate in their own gymnasium.

We will again contract with Skatetime this year to keep the skates for two weeks, meaning each child would be able to skate during five or six consecutive physical education periods. The cost of this program will be \$9.00 per student for grades K-4 and \$10.00 per student for grades 5-7(upper grade students use inline skates and that is the reason for the difference in price). Please return your permission slip and money to the office or Mr. Lescohier **by Friday, February 28**.

Skatetime will provide wrist guards and helmets for all students; however, they do not provide knee, or elbow pads. We encourage all students to bring their own helmets, wrist guards, knee, and elbow pads from home to use during this unit. A bike helmet or any other type of athletic safety helmet will work. Any student using one of the Skatetime helmets will be required to wear a head cap.

Many students consider the roller skating unit to be their favorite physical education activity of the year. Our dates of participation in this program are March 4th – March 20th. If you have any questions, please feel free to contact us at school.

Thank you.

Mike Lescohier leschoierm@swallowschool.org Chris Evans evansc@swallowschool.org





Please return the permission slip below with payment (\$9.00 K-4th, \$10.00 5-8th) to **Mr. Lescohier or Front Office**

Please make checks payable to "Swallow School"

Yes, my child,	, may participate in this skating activity.
Parent Signature	
Class/Homeroom	
Grade	