

SWIMMING PERMISSION FORM

Name of Group _____ Group Leader _____

Destination _____ Dates of Trip _____

Participant's Name _____

Address _____

Phone _____

Parent / Legal Guardian's Name _____

Address (if different from above) _____

Emergency Phone _____

THERE ARE NO LIFE GUARDS ON DUTY. SWIM AT YOUR OWN RISK.

I **GIVE** permission for my child/children _____ to participate in swimming activities while on the _____ trip to _____.

My child/children _____ **MAY NOT** participate in swimming activities while on the _____ trip to _____.

Responsibility: I understand and agree to support all state laws and rules set by the Group, School District, Directors and Chaperones. Any serious infraction or repeated infractions will result in my child being sent home immediately by commercial carrier at my expense.

We have read, fully understand and agree with the above statements.

Participant's Signature _____ Date _____

Parent / Legal Guardian's Signature _____ Date _____