



## SWIM PERMISSION SLIP

CHILD'S NAME: \_\_\_\_\_ DATE \_\_\_\_\_

\_\_\_\_ I give permission for my child to swim at L.I. Voyager's Day Camp.

\_\_\_\_ I DO NOT grant permission for my child to swim at L.I. Voyager's Day Camp.

\_\_\_\_\_

PLEASE SEND YOUR CHILD DRESSED IN THEIR SWIMSUITS ON SWIM DAYS.

For the purpose of: \_\_\_\_ Swimming - recreational

There will be Red Cross Life guards, and Recreation Leaders present at all times.

Please give us information regarding your child's water skills:

\_\_\_\_ NO experience with water

\_\_\_\_ Has been in water with no formal instruction

\_\_\_\_ Has attended the following swim classes \_\_\_\_\_ Years attended camp \_\_\_\_\_

\_\_\_\_\_

Does your child usually wear floatation devices while in water?

\_\_\_\_ (This would include water wings.)

Any other information you would like to provide:

\_\_\_\_\_

Date \_\_\_\_\_

Parent or Guardian Signature