

**CAMP SYLVAN
Swimming Permission
Form Summer 2017**

Child's Name: _____

Parent's Name: _____

Child's Age: _____

Child's Swimming Ability:

Beginner _____

Intermediate _____

Advanced _____

Special Limitations, Conditions or Instructions: _____

The staff of Camp Sylvan has my permission to take my child swimming at one of Treetops Resort's swimming pools for a planned swimming session.

Parent Signature

Date