



**Pickaway Co. Family Y  
SCHOOLS DAY OUT  
SWIMMING PERMISSION FORM**

**FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY**

Child's Name \_\_\_\_\_ Birth date: \_\_\_\_\_

I, \_\_\_\_\_, parent/guardian of \_\_\_\_\_,  
Parent/Guardian's Name Child's Name

grant permission for my child to swim at Pickaway Co. Family Y indoor pool during the Schools Day Out Program  
Name/location of pool

from August 15, 2017 through May 31, 2018. I understand that a lifeguard will be on duty at all times. The program will maintain a minimum staff/child ratio of 1:18 during swimming activities. The program will not be providing additional adults beyond the required staff/child ratio.

**PLEASE CHECK ALL APPLICABLE INFORMATION BELOW**

**MY CHILD:**

**CHILD'S AGE:** \_\_\_\_\_

- \_\_\_\_\_ Is a non-swimmer (MUST use a floatation vest to be in the water)
- \_\_\_\_\_ Is a swimmer – cannot be tested to swim in the deep end/ no vest worn
- \_\_\_\_\_ Is a swimmer – can be tested to swim in the deep end
- \_\_\_\_\_ Has successfully completed formal swimming lessons

I agree to hold harmless the YMCA, its agents and employees for all incidents alleging bodily injury or property damage or loss occurring while the person herein described is a participant in a YMCA sponsored activity on or off the YMCA premises. I will not hold harmless the YMCA from any liability arising out of negligence of the YMCA.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Witness: \_\_\_\_\_ Date: \_\_\_\_\_

*\* A new form must be completed for each new swimming trip that is not routine, and each time you visit a new swimming location.*