

Child's Name \_\_\_\_\_ Grade \_\_\_\_\_

My child is allowed to swim if he/she chooses to.

My child does not have my permission to swim. *[Note: Wristbands will be provided to indicate non-swimmers.]*

There will be 5 certified lifeguards on duty at all times; a swim test will be given for access into the deep end of the pool.

Permission hereby given for \_\_\_\_\_ to take part in the following trip:  
Student's Name

### Annual Field Day - BBQ and Swimming at the Seekonk Swim Club

By signing this permission form, I (Parent/Guardian) certify that I request and allow the designated child to participate.

My signature further indicates that I release Saint Cecilia School from any and all liability.

\_\_\_\_\_  
Parent/Guardian Signature

### Important Information

We will leave the school at 8:30 a.m. and return to school at 1:30-2:00 p.m.

### Parent/Guardian complete this section

If we return after school hours, my child has been instructed to:

Walk Home       Will be picked up by: \_\_\_\_\_

Will go to extended care until: \_\_\_\_\_

Phone Number where I can be reached the day of the trip: \_\_\_\_\_

Does the child have any allergies?  No  Yes, \_\_\_\_\_

May we give Tylenol tablets to your child if he/she complains of a headache?  Yes  No

### Emergency Care

You are hereby authorized to provide \_\_\_\_\_ with any emergency  
Student's Name

lifesaving care and/or treatment until such time as I may arrive. All efforts will be made to reach you immediately.

\_\_\_\_\_  
Parent/Guardian Signature