



## SWIMMING CONSENT

Pupil's name.....

I give consent for my child to take part in the swimming lessons organised by The Forest School.

I understand that these lessons will be under the supervision of a qualified life-saver and a member of staff.

- My child has no medical condition which needs additional supervision.
- My child suffers from the following complaint and needs additional supervision.

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- Delete as applicable.

Signed..... (Parent/Guardian)

Date.....