

Extension Center for 4-H Youth Development Parental Authorization to Swim and Release of Liability

Name of event where swimming will take place			
Location of event		Date of event	
I hereby grant permission for my child, named below, t liability any instructor or person assisting with this act activity.			
4-H member's name			
4-H member's age County			
4-H'er's swimming ability (choose one): Good Fa	air Poor		
4-H'er will not be allowed to swim if this form has not	been signed and turned in at cheo	ːk-in.	
Signature of parent/guardian	Phone	Date	
Signature of parent/guardian	Phone	Date	

Form 1192 (POD-02-24)

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