

TAWA COLLEGE

Local EOTC Swimming Consent

•	Swimming a ls your child a	ability able to swim 50 metres?	Yes	No	Don't know
•	Is your child v	vater confident in a pool?	Yes	No	Don't know
•	Is your child o	confident in deep water?	Yes	No	Don't know
•	Is your child a	able to tread water?	Yes	No	Don't know
•	Is your child a	able to survival float?	Yes	No	Don't know
•		confident in the sea or in open water?	Yes	No	Don't know
•	Is your child s	afety-conscious in and around water?	Yes	No	Don't know
	1.	I have read the information provided about the event and agree to my child taking part in the activities.	Yes		No
	2.	I consent to any emergency treatment required by my child during the course of the event.	Yes		No
	3.	I confirm that my child is in good health and I consider him/her fit to participate.	Yes	No	
	Signed:				
	Full name of	parent/caregiver:			

Please return to the student office before Friday 29th June 2018