



YMCA Water Activity Permission Form

FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Name of Child: _____ Date of Birth: _____ Age: _____

I _____ give consent for _____
(Name of parent/guardian) *(Name of Child)*

to participate in water activities while at _____
(Name of provider / facility)

I understand that my child’s care provider will:

- Maintain a safe staff to child ratio while participating in water activities
- Closely monitor my child and will never leave them unattended while they are participating in water activities listed below.

My Child MAY participate in: Please check all that apply

- Slip & Slide
- Sprinkler
- Community Splash Pads Community Splash Pads
- Lake or Manmade Beach (Camp Cormorant, Buffalo River State Park, Blue Eagle Lake in Barnesville)
- Community Pool / Water Slide
Location / address: _____

My Child’s Swimming Abilities: Please check all that apply

- A non –swimmer
- Has successfully completed formal swimming lessons
Describe what level / skills your child has in swimming _____
- Has special needs with water activities
Please describe: _____

NON-SWIMMER: *(Must be filled out if a non-swimmer)*

For those who are non-swimmers we **REQUIRE** that you provide a **properly fitted, Coast Guard approved** life jacket for your child to wear while at a community pool.

- I will provide my child with a properly fitted Coast Guard approved life jacket for them to wear while at a community pool.
- Although I know my child is a non-swimmer, I chose to **NOT** have my child swim at the community pool.

Expiration date of permission form: _____ Today’s Date: _____

Parent(s) or Guardian(s) name: _____

Signature of parent / Guardian: _____

**Please see director if financial assistance is necessary in purchasing life jacket.

YMCA OF CASS AND CLAY COUNTIES

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