



## SUMMER CAMP SWIMMING PERMISSION SLIP

### RE: SWIMMING AND APPLICATION OF SUNSCREEN AND/OR BUG SPRAY

I \_\_\_\_\_, give permission for my child \_\_\_\_\_, to attend the Youth Community Outreach Program (Y-COP) Summer Day Camp swimming program at The Mount Vernon High School. I have been advised that all campers must wear a bathing suit (not light blue in color) or swim trunks and a swim cap. I further permit Y-COP staff to apply sunscreen and/or bug spray for outdoor activities. SPF must be 30 or higher and not expired. Bug spray will be carried on all field trips and applied as necessary. Please be sure to label all items with the child's name for safekeeping.

I give further authorization for Y-COP staff to take the necessary precautions in the event of an emergency, which may include transport to the nearest hospital.

\_\_\_\_\_  
Parent's Name (print)

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Cell Phone #

\_\_\_\_\_  
Date