



EARLY DEPARTURE OF SWIMMER FORM

Swimmer's Name: (First & Last): _____

Name of Swim Meet: _____

Dates of Swim Meet: _____

Location of Swim Meet (City & Province/State): _____

Please be advised that I wish to have my swimmer depart from the team prior to the end of the above competition. I understand that if approval is granted I am / we are then fully responsible for the well-being and transportation of my swimmer from that time onwards. I also agree that only myself or the other parent/guardian of the swimmer will be allowed to depart early with the swimmer.

Date of Early Departure: _____

Estimated Time of Early Departure: _____ *(i.e. after completion of Session 7)*

Name of Person(s) accepting responsibility upon Departure: _____

Printed Name of Parent: _____

Printed Name of Parent: _____

Signature of Parent: _____

Signature of Parent: _____

Date: _____

Date: _____

Lead Coach's Approval:

Print Name

Signature

Date

****Please ensure that the swimmer notifies the Lead Coach just prior to departure that they are leaving****