



SFY TSUNAMI PERMISSION TO PICK-UP

SUSSEX FAMILY Y

I give the following individuals permission to pick-up my child from swim team practices at the Sussex Family Y in Rehoboth Beach, Delaware. I understand that if I wish to have an individual's name added to or deleted from this list, I must notify the Competitive Aquatics Staff in writing. I have notified the persons mentioned below, that they may be asked to provide identification before my child will be permitted to leave with them. My signature on this document is my acknowledgment that I have received and agree to comply with the SFY Tsunami Drop-off/Pick-up Policy.

Please Print All Information

Swimmer Name: _____ Practice Level: _____

Parent/Guardian: _____ and _____

Persons with permission to pick-up my child (other than parent/guardians listed above):

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

12 & OLDER SWIMMERS ONLY: My swimmer, named above, is age 12 or over and has my permission to sign in and out of swim practice.

Parent/guardian signature

Date