



Technique Swim Camp

www.techswimcamp.com

617-484-0550

PO Box 26, Belmont, MA 02478

Transportation Permission Summer 2012

If your child will ride home with someone other than a legal guardian, take the T, walk, or ride their bike, then please submit this form on the first morning of camp.

Name of Child: _____

I hereby give my child permission to leave the Technique Swim Camp by T, by bike, on foot, or with the following people on the following days (please specify):

Monday: _____

Tuesday: _____

Wednesday: _____

Thursday: _____

Friday: _____

For: Enter Session #, Dates, and Indicate Location

Session # _____ Week of _____ at Harvard _____ at Northeastern _____
Session # _____ Week of _____ at Harvard _____ at Northeastern _____
Session # _____ Week of _____ at Harvard _____ at Northeastern _____

Printed Name of legal guardian

Signature of legal guardian

Date